MACON COUNTY SHERIFF'S OFFICE REQUEST FOR PUBLIC RECORD

Requests must be made in writing. Requests may be submitted by mail, fax, email or personal delivery.

Submit requests to:
Michael B. Baggett
FOIA Officer
253 E. Wood St., 4th Floor
Decatur, IL 62523

Fax: (217) 424-1402 Email: mbaggett@sa-macon-il.us

	For offi	cial use	only	

REQUESTER'S CONTACT INFORMATION

Last Name	First Name		Middle Initial	Date of Birth
Address	City	State	ZIP	Phone No.
Email				
RECORDS REQUES	<u>TED</u>			
Identify or describe the	e records you are requestin	g. Be as speci	fic as possible.	
ADDITIONAL INFOR	MATION			
"Commercial purpose" m form for sale, resale, or s media and non-profit, so the principal purpose of t (ii) for articles of opinion	cords for a commercial purple eans the use of any part of a public solicitation or advertisement for salicentific, or academic organizations the request is (i) to access and dis or features of interest to the public VFUL TO OBTAIN A PUBLIC RE-	ic record or record les or services. For shall not be consid seminate information, or (iii) for the purp	s, or information deriver purposes of this defined to be made for on concerning news abose of academic, so	inition, requests made by news a "commercial purpose" when and current or passing events, ientific, or public research or
Are you requesting yo	our own records?		Yes	_ No
Are you requesting a fee waiver?			Yes	No

Generally, a response to your request will be made within 5 working days of receipt of your request. If a longer response time is necessary, requesters will be notified as required by the Freedom of Information Act.