## **Macon County Environmental Management Department**

## **REQUEST FOR PUBLIC RECORD**

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

Submit requests to: Laurie Rasmus FOI Officer

Phone: (217) 425-4505 Fax: (217) 424-1459

141 S. Main St., Rm.408 Email: Irasmus@co.macon.il.us

Decatur, IL 62523

## FOIA Request No.\_\_\_\_\_ Received: \_\_\_\_\_ Response Due: Extended Response Due Date (if applicable):\_\_\_\_\_

FOI Officer:

FOR OFFICIAL USE ONLY - DO NOT WRITE IN THIS BOX

## REQUESTER'S CONTACT INFORMATION

Last Name	First Name		Middle Initial	Date of Birth
Address	City	State	ZIP	Phone No.
Email				
RECORDS REQUES	STED			
Identify or describe th	ne record you are requesting	g. Be as specif	ic as possible.	
ADDITIONAL INFOR	RMATION			
"Commercial purpose" r form for sale, resale, or media and non-profit, so the principal purpose of (ii) for articles of opinion education. IT IS UNLAN	ecords for a commercial purple means the use of any part of a public solicitation or advertisement for sacientific, or academic organizations the request is (i) to access and distort features of interest to the public WFUL TO OBTAIN A PUBLIC REMMERCIAL PURPOSE.	lic record or record les or services. For shall not be conside seminate information, or (iii) for the pur	s, or information der purposes of this de dered to be made fo on concerning news pose of academic, s	rived from public records, in any finition, requests made by news r a "commercial purpose" when and current or passing events, cientific, or public research or
Are you requesting you	our own records?		Yes	No
Are you requesting a	fee waiver?		Yes	No
Generally a response	e to vour request will be ma	de within 5 wor	king days of rec	aint of your request. If a

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.