REQUEST FOR PUBLIC RECORDS

TO: Kim Hogue,
Freedom of Information (FOI) Officer
1800 Edison Avenue, P.O. Box 1366
Granite City, IL  62040
Telephone: (618) 452-9400
Fax: (618) 452-4810

FROM: _____________________________________________
NAME
_____________________________________________
ADDRESS
_____________________________________________

TELEPHONE NUMBER          FAX NUMBER
_____________________________________________

EMAIL ADDRESS

1. Are you representing another person, firm or corporation in making this request? Yes____ No____ If yes, please provide the name and address for that person, firm or corporation.

2. Phone number where you can be reached during business hours: _______________

3. State and describe, as specifically as possible, the information you are requesting.

4. Please indicate below if you prefer to inspect the records at the MESD office, prefer a paper copy of the records or prefer the records in an electronic format.

____ Review in Office   ____Provide with Paper Copy   ____Provide Electronic Files

Please note: There is no fee for the first 50 black and white, letter or legal sized copies. Each additional copy is $0.15 per sheet. Copies in color or in a size other than letter or legal size, or any costs associated with the transfer of electronic files will be charged at MESD’s actual cost for reproducing the records.

5. Do you wish to have copies certified? ________________________________

FOR OFFICE USE ONLY

Date Received ______________ Date Response Due ______________

Notations regarding oral communications or other items: