

**Sangamon County Sheriff's Office (SCSO)**  
**FREEDOM OF INFORMATION**  
**Request for Examination or Copy of Records**  
**-PLEASE PRINT LEGIBLY -**

**REQUESTORS INFORMATION:** Date of your request: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Address: \_\_\_\_\_

City, State and Zip Code: \_\_\_\_\_

Date / Time of Incident: \_\_\_\_\_ Case Number \_\_\_\_\_

Type of Incident (IF APPLICABLE): \_\_\_\_\_

Location of Incident (IF APPLICABLE):  
\_\_\_\_\_

I am requesting the following record(s) for inspection / copying:

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***\*There is a \$ .10 charge per page for all pages over 50  
and \$ .10 per page for color copies, when available.***

**THE BELOW ITEMS WILL BE COMPLETED BY SCSO PERSONNEL:**

1. Date request received at SCSO: \_\_\_\_\_
2. Name of Person who received the request at SCSO: \_\_\_\_\_
3. Date response is due: \_\_\_\_\_

**Response to Information Request**

Date of compliance with request: \_\_\_\_\_ By: \_\_\_\_\_

Date of time extension agreement: \_\_\_\_\_ By: \_\_\_\_\_

Should your request be denied in full or in part, you will be notified by separate letter. If so, the below information will be applicable.

**REQUEST FOR REVIEW:** If your request for records has been denied, in-whole or in-part, you have the right to appeal this decision to:

**Illinois Attorney General's Office**  
**Public Access Review**  
**500 S. 2<sup>nd</sup> Street**  
**Springfield, Illinois 62706**  
**217/558-0486**  
[publicaccess@atg.state.il.us](mailto:publicaccess@atg.state.il.us)

You may also appeal your denial through the Sangamon County Circuit Court.