

**FREEDOM OF INFORMATION
REQUEST TO INSPECT OR COPY RECORDS**

TO: FREEDOM OF INFORMATION OFFICER

Community College District No. 540, Counties of DeWitt, Ford, Livingston, Logan, McLean, and Tazewell, and State of Illinois (Heartland Community College).

This request is made for the following records (describe below as specifically as possible).

This request is being made to further a commercial enterprise: Yes / No (circle applicable response).

DATE: _____

Signature:
Name (please print):
Address:

Telephone:
Email:

(FOR OFFICE USE ONLY)

Date Received:
Date Response Due:
Disposition of Request:

Action Taken:

Fees Assessed: