Response Due Da	esponse Due Date:
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(for office use only)

FREEDOM OF INFORMATION ACT (FOIA) REQUEST FOR EASTERN ILLINOIS UNIVERSITY RECORDS

То:	Robert L. Miller FOIA Officer/General Counsel Eastern Illinois University 600 Lincoln Avenue Charleston, IL 61920 Telephone: 217-581-7249 Facsimile: 217-581-7989	Date: 4/73/17 From: Tyun Heereman Printed Name of Requester Mailing address:	
Ple	ase type or print clearly.	Telephone number: indicate below the name and address of your	RECEIVE
	department ONLY if you want the Department: Address:	record(s) to be sent there.	APR 2 7 2012
Descr	iption of requested record(s): Criminal Police Nec	ords For	
	Records will be provided and fees	FORM MUST BE SIGNED. Signature of Requester Charged according to the Illinois Freedom of CS 140/2(d), a response from the FOLA Officer.	

Records will be provided and fees charged according to the Illinois Freedom of Information Act. Pursuant to 5 ILCS 140/3(d), a response from the FOIA Officer will be provided within five business days. You will be notified if additional time is required to process your request.