

**REQUEST FOR INFORMATION FORM**

**\*\*Note to Requester: Retain a copy of this request for your files. \*\***

**Vaughn Cascade County Water & Sewer District  
1161 6 AVE  
Vaughn, MT 59487**

Date Requested: \_\_\_\_\_

Request Submitted By: \_\_\_ E-mail \_\_\_ U.S. Mail \_\_\_ In Person

Name of Requester: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/County Zip (required): \_\_\_\_\_

Telephone (Optional): \_\_\_\_\_

E-mail (Optional): \_\_\_\_\_

Records Requested: \*Provide as much specific detail as possible so the public body can identify the information that you are seeking. You may attach additional pages, if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you want copies of the documents? YES or NO

**Copies** – photocopies are 50 cents for the first page and 25 cents for each subsequent page.  
MCA 2-6-1006

Is this request for a Commercial Purpose? YES or NO

(It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1(c)).