

STATE OF ILLINOIS
ILLINOIS COMMERCE COMMISSION
Public Participation Request Form

DATE: _____

I request an opportunity to address the Illinois Commerce Commission during the public comment period of the Illinois Commerce Commission meeting scheduled for _____.

(Required information is marked with an asterisk [“*”].)

NAME: * _____

ADDRESS: * _____

SUMMARY OF THE PRESENTATION: * _____

GROUP REPRESENTED BY PERSON MAKING REQUEST (If none, state “None.”):

* _____

TELEPHONE NUMBER: _____

E-MAIL ADDRESS: _____

The request must be submitted to the Chief Clerk of the Commission at least 24 hours prior to the Commission meeting, at the following address:

Illinois Commerce Commission
Chief Clerk's Office
527 E. Capitol Avenue
Springfield, IL 62701
Fax: (217) 524-0673
PublicRequest@icc.illinois.gov

The Chief Clerk's Office will notify you as to whether your request has been granted or denied.