

Master Record File Summary – Attorney Request

To: Master File Summary Office
1301 Concordia Court
Springfield, IL 62794

I am a registered attorney license number _____, licensed state _____.

I certify that I currently represent Individual in Custody _____, Print Name

ID number _____. Pursuant to 730 ILCS 5/3-5-1, I hereby request a summary of my client’s master record file.

I understand the summary will contain:

- 1) Name, ethnic, racial, and other identifying information.
- 2) All digitally available information from the committing court.
- 3) All information in the Offender 360 system on criminal history.
- 4) Complete assignment history in the Department of Corrections.
- 5) Disciplinary card.
- 6) Records of all grievances filed on or after January 1, 2023.
- 7) I may also request additional records regarding up to 3 specific disciplinary incidents. I am requesting records regarding the following disciplinary incidents:

- 8) I may also request available records about up to 5 specific grievances prior to January 1, 2023. I am requesting records regarding the following grievances:

I understand the master record file summary may contain confidential medical/mental health or substance abuse information. As such, included with this request are client-executed forms DOC 0240 and DOC 0241. These forms also serve as my client’s authorization for me to receive this master record file summary. I acknowledge that I may request and receive one master record file summary regarding my client per year.

Print Name

Signature

Date

This request will be processed within 15 days of receipt of a properly executed form along with forms DOC 0240 and DOC 0241.