

FOIA REQUEST

***Note to Requester: Retain a copy of this request for your files. If you eventually need to file a Request for Review with the Public Access Counselor, you will need to submit a copy of your FOIA request. ***

Name and Address of Public Body Receiving Request: _____

Date Requested: _____

Request Submitted By: ___ E-mail ___ U.S. Mail ___ Fax ___ In Person

Name of Requester: _____

Street Address: _____

City/State/County Zip (required): _____

Telephone (Optional): _____ E-mail (Optional): _____

Fax (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

--Do you want Electronic Copies or Paper Copies? _____

--If you want Electronic Copies, in what format? _____

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)).