

## FREEDOM OF INFORMATION ACT (FOIA) REQUEST FORM

\*\*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 & Address of Public Body Receiving Request: \_\_\_\_\_

Date of Request: \_\_\_\_\_

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

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

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

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

Telephone (Optional): \_\_\_\_\_ Fax (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	NO	Electronic or Paper Copies	If electronic copies, what format
Is this a request for commercial purposes?	YES	NO	<i>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)</i>	
Are you requesting a fee waiver?	YES	NO		

Your Signature: \_\_\_\_\_

***Please note: Charges for electronic media and/or copies/prints in excess of 50 pages may apply***

**For Office Use Only**

Date Request Received	Who Received Request	Action Taken (use back of form if you require more room)	Request Received via: <input type="checkbox"/> U.S. Mail <input type="checkbox"/> Fax <input type="checkbox"/> In Person <input type="checkbox"/> Email (attach copy of email)
Time Request Received	Request forwarded to (if applicable)		