



## FOIA Request Form

Note to Requester: Please retain a copy of this request for your files.

Date	
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Request submitted by:  Email  U.S. mail  Fax  In-person

Name	
Address	
City, State, Zip	

Contact Phone	
Email	
Fax	

Record(s) requested:

Do you want copies?  Yes  No

*If Yes*  Paper  Electronic

Is this request for a commercial purpose?  Yes  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 a public body. (5 ILCS 140.3.1 (C))*

Are you requesting a fee waiver?  Yes  No

*If you are requesting that the public body waive any fees for copying the documents, you must attach a statement of the purpose of the request, and whether the principal purpose of the request is to access or disseminate information regarding the health, safety, and welfare or legal rights of the general public. (5 ILCS 140/6 (C))*