



Freedom of Information Act (FOIA) Request Form

Requestor's Information:

Name: _____ Date Requested: _____

Street Address: _____

City / State / County / Zip (required): _____

Primary Phone: _____ Email Address: _____

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 to receive copies of the documents? YES NO

The first 50 pages of letter copies are free. Any surpassing quantity is charged at 15 cents per page.

What format would you like the document copies? ELECTRONIC PAPER

Is this a 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 the public body pursuant to 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))

Response may take 5 to 21 working days, depending on type of request. Retain a copy of this request for your files.

FOR OFFICE USE ONLY

Date of Response: _____

Response Given (If denied, state reason): _____

Records available? YES NO Copies made? YES NO Quantity: _____ Fee: \$ _____

FOIA Officer: 815.423.5780

100 E. Mississippi St. ♦ PO BOX 411 ♦ Elwood, IL 60421

www.JacksonTownshipIL.com ♦ JacksonTownshipAssessor@gmail.com