

Date Received: _____

Date Due: _____

Extension: _____

FOIA Request # _____

Request for Public Records under the Illinois "Freedom of Information Act" (5ILCS 140/1 et seq.)

Requestor's Name (Please Print)

Mailing Address (Please Print)

City State Zip

Home Phone # Work/Cell #

Fax #

Date of Request _____

I wish to: ☐ Inspect only (no copies) ☐ Pick up copies
☐ Receive copies via fax
☐ Receive copies via e-mail

The Village of Manteno will respond to this request within five (5) business days. If this request requires an extension, five (5) additional days will be requested and sent to you in writing.

The Village of Manteno will respond to Commercial request within twenty-one (21) business days.

REQUESTOR'S SIGNATURE

E-mail Address (Please Print)

DESCRIPTION OF PUBLIC RECORD Please be as specific as possible in identifying the document(s) you are seeking.

Is the information requested to be used for Solicitation/Commercial Purposes? ☐ Yes ☐ No

RESPONSE:

Your request has been approved ☐
Your request has been denied ☐
Your request has been partially denied ☐
Please see the attached letter of explanation ☐

This request has been prepared

By: _____

Date: _____ # of pages _____

FEES:

Less than 50 pages	No Charge
_____ pages @ .15 ea.	_____
_____ pages (oversize)	_____
Total Due	_____

FOIA Officers: Crystal Wolfe