

**GENOA TOWNSHIP PARK DISTRICT
PUBLIC RECORDS REQUEST FORM
PURSUANT TO THE ILLINOIS FREEDOM OF INFORMATION ACT**

(Please print) **DATE OF REQUEST** _____

NAME _____

ADDRESS _____

TELEPHONE _____

E-MAIL _____

Is this request for Commercial Purposes? _____yes _____no

Information being requested and in what format? Be as specific as possible.

If we have questions concerning your request, what is the best way to contact you?

SIGNATURE of person making request: _____

To be completed by the District's FOIA Officer:

Date Request Received: _____ *[date stamp]*

Request fulfilled Date: _____
(Or- If Request Denied, attach letter of explanation)

Description of Document(s) provided: _____

Charges for Requested Information: \$ _____ *Date Pd.* _____

Signature of FOIA Officer: _____