

GURNEE PARK DISTRICT
REQUEST FOR INFORMATION
UNDER THE FREEDOM OF INFORMATION ACT

Date of Request: _____

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

Name of Requester: _____

Street Address: _____

City/State/County/Zip Code: _____

Daytime Telephone (Optional): _____

E-mail (Optional): _____

Fax (Optional): _____

Records Requested: *Provide as much specific detail as possible so that the Park District can identify the information you are seeking. You may attach additional pages, if necessary.*

Do you want copies of the documents? (circle) YES or NO

- Do you want electronic copies or paper copies? _____

- If you want electronic copies, in what format? _____

Is this request for a commercial purpose? (circle) YES or 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. 5 ILCS 140.3.1(c)).

Are you requesting a fee waiver? (circle) YES or 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)).

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.

For FOIA Officer Use

Date and time Request Received: _____

Response period will expire on: _____

Signature of FOIA officer who received request: _____