

FREEDOM OF INFORMATION ACT REQUEST FORM

Name: _____ **Date Submitted:** _____

Address: _____ **City/State/Zip:** _____

Email Address: _____ **Phone Number:** _____

Records Requested:

Please indicate the format in which you would like the Village to respond:

- Inspect at Village Hall during regular business hours (Monday-Friday 9am to 2pm)
- Electronic copies to be sent to the email listed above
- Hard copies and agree to pay the fees (if any) for copies set by the fee schedule below:
 - Black & White/Letter/Legal-Size Copies: No charge for the initial 50 pages and every page after will cost \$0.15
 - Color/Irregular Sized Copies: Actual cost incurred by the Village to reproduce such request

Signature of Requestor: _____ **Request Number:** _____

Please return completed form to:

Village of Green Oaks, 2020 O'Plaine Rd, Green Oaks, IL 60048
 Or via email to: Julie.Goodman@greenoaks.org

General Provisions of the Freedom of Information Act Section 5 ILCS 140/3 from Ch. 116, par. 203 Sec. 3d:

Each public body shall, promptly, either comply with or deny a request for public records within 5 business days after its receipt of the request, unless the time for response is properly extended under subsection (e) of this Section.

FOR OFFICE USE ONLY

Date Request Received:	Date Response Due (5 Business Days):	Date Response Made:
Completion Time:	Copies Made:	How Many: Cost:
Extension Request Date:	Date Extension Notice Sent:	Date Extension Accepted:
Request Denied (Yes/No):	Date Denied:	Denied Reasoning:

FOIA Officer Signature: _____