GRANDWOOD PARK PARK DISTRICT



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REQUEST FOR INFORMATION UNDER THE FREEDOM OF INFORMATION ACT

Date of Request
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 wish to attach additional pages, if necessary.

Do you want copies of the documents? [] YES [] NO

- Do you want [] electronic copies, or [] paper copies
- If you want electronic copies, in what format?

Is this 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 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)).

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______