

**Illinois Freedom of Information Act (FOIA)
Request for Information P.1**

Today's Date: _____ **Time:** _____

Name: _____

Address: _____

City, State Zip: _____

Home Telephone: _____ **Work Telephone:** _____

I hereby request to inspect/receive a copy of the following records:

Signature _____ Date _____

I, _____, _____ do hereby verify that
Name Title
I am in receipt of the above request on this _____ day of _____, _____.