



RICH TOWNSHIP

FREEDOM OF INFORMATION REQUEST

(Complying with Public Act 96-542, effective January 1, 2010)

Date Requested: _____

Requestor Name: _____

FIRST

MIDDLE

LAST

Address: _____

NUMBER

STREET

APT NUMBER

CITY

STATE

ZIP CODE

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____ Fax Number: _____

METHOD REQUEST WAS SUBMITTED: In Person U.S. Mail E-Mail Fax

Records Request (Please Provide as many specific details as possible for our department to identify the information you are seeking, include all pertinent information such as Address, Time Frame, and Name)

[Empty box for providing details of the records request]

Is this request being made for commercial purposes? YES NO

It is a violation FOIA for a person to knowingly obtain a public record for commercial purpose without disclosing that its for commercial purposes. 5ILCS 40.31(c)

Number of Copies Requested: _____ Signature: _____

Standard black and white copies will be provided at no charge for the first fifty (50) pages. Requestors will be charged .15¢ per pages beyond fifty.

PLEASE RETURN YOUR REQUEST IN PERSON, VIA U.S. MAIL, FAX, OR BY E-MAIL TO:

RICH TOWNSHIP

Attn: FOIA Officer

22013 Governors Highway

Richton Park, IL 60471

E-MAIL: SA1-Amin@RichTownship.org

For further inquiries, please call (708) 748- 6722 ext. 5055

PREFERRED RESPONSE: In Person U.S. Mail E-Mail Fax

FOR OFFICE USE ONLY:

Date Received: _____ Requestor Contacted? YES, Date: _____

Extension: _____

Due Date: _____ Date Completed: _____

Delivered Via: In Person U.S. Mail E-Mail Fax

Date Sent To Requestor: _____ Verified By: _____