FOIA REQUEST FROM for the VILLAGE OF WATERMAN

Name of Requester:	:				
Address:	Street		City	State	Zip Code
Dhono			-		
Phone : E-Mail :			FAX:		
* Note to Requester: Retain a copy of you will need to submit a copy of			l to file a Request for Rev	view with the Public Acc	ess Counselor,
Records Requested:	Please provide as much specific detail as possible so the Village of Waterman can identify the information that you are seeking. Please attach additional pages, if necessary.				
•					
Is this request for a Committee (It is a violation of the Freedom of Internal that it is for a commercial purpose, ignormal that it is is a commercial purpose, ignormal that it is is a commercial purpose, ignormal that it is a commercial purpose, ignormally in the commercial purpose and it is in the commercial purpose.	nformation Act for a perso		•	nercial purpose without	disclosing
Are you requesting a fee (If you are requesting that the public and whether the principal purpose of the general public. 5 ILCS 140/6(c	body waive any fees for c f the request is to access o				_
FEES: The FOIA statute sets of the first 50 pages are free, and abnormal sized copies, the mulimited to the actual cost of the	d the charges for add unicipality may charg	litional pages may r ge the actual cost of	not exceed 15 cents p copying. Charges f	per page. For color	or
		for office used	only		
Request Submitted by:	In Person	US Mail	FAX	E-mail	
Request Received By:					
		Name		Date	Time
Day, Date Due:					
Under Illinois statutes, tin unless the last day is Satur	•		•	•	

If the day following the Saturday, Sunday or a holiday is also a Saturday, Sunday or holiday,

then that following day is also excluded. 5 ILCS 70/1.11.

FOIA_RequestForm