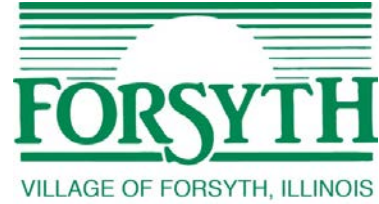


VILLAGE OF FORSYTH

301 S. Route 51
Forsyth, IL 62535

Phone: (217) 877-9445 / Fax: (217) 877-9863



**REQUEST FOR INFORMATION FROM
THE VILLAGE OF FORSYTH UNDER THE
ILLINOIS FREEDOM OF INFORMATION ACT**

Name (please print): _____

Street Address: _____

City/State/Zip: _____

Phone (home): _____ Work: _____

I hereby request to inspect the following records (Please list all records sought to be inspected):

I hereby request to have paper copies made of the following records:

I hereby request that copies of the following records be provided to me electronically:

My E-mail address is as follows: _____

Date (month/day/year) and time records requested: _____

Signature of individual making request: _____

I hereby verify that I received on the date so noted those records requested which are available for inspection under the Illinois Freedom of Information Act:

Signature: _____ Date: _____

(Note: \$0.15 per page for copies requested after the first 50 pages requested)

*****FOR OFFICE USE ONLY*****

The records so requested have been reviewed and are appropriate for release under the guidelines of the Illinois Freedom of Information Act;

The following records have been reviewed and deemed exempt from release under the Illinois Freedom of Information Act:

Reason access was denied to above listed records (list names and titles of all persons authorizing detailed and specify exact sections of the Illinois FOIA which applies):

Signature: _____ Date: _____

Of the records requested, copies were provided of the following:

The records so requested were presented to such individual for inspection at:

_____ on the _____ day of _____, 20____
Time Day Month Year

Signature, Title, and Department of employee presenting records for inspection:

Signature

Title

Department

Fee Collected: \$ _____