

Sandwich Public Library District
925 South Main Street
Sandwich, Illinois 60548



Illinois Freedom of Information Act Request

This is a request for information under the Illinois Freedom of Information Act, 5 ILCS 140.

I request that a copy of the following documents/or documents containing the following information be provided to me:

- I would like to inspect these records in person.
- I would like electronic copies of these records.
- I would like to obtain copies of these records.

I understand that the Act permits a public body to charge a reasonable copying fee not to exceed the actual cost of reproduction and not including the costs of any search or review of the records for more than fifty pages of material. 5 ILCS 140/6.

I am willing to pay fees for this request up to a maximum of \$_____.
If you estimate that the fees will exceed this limit, please inform me first.

I request a waiver of all fees for this request. Disclosure of the requested information to me is in the public interest because it is likely to contribute significantly to public understanding of the operations or activities of the government and is not primarily in my commercial interest.

As required by the Act, 5 ILCS 140(3), this request will be responded to within five days or twenty-one days for commercial purposes.

Signed

Name: _____

Address: _____

City, State, Zip Code: _____

DATE

OPTIONAL

Phone: _____

E-mail: _____