

EVERGREEN PARK PUBLIC LIBRARY
9400 S. Troy Avenue
Evergreen Park, IL 60805

FREEDOM OF INFORMATION (FOIA) REQUEST

Note to Requester: This form is designated to provide you with helpful guidance on how to submit a FOIA request to Evergreen Park Public Library. You do not need to use this form. You may submit a FOIA request in any written format you choose. Retain a copy of this request for your files. If you need to file a Request for Review with the Public Access Counselor, you will need to submit a copy of your FOIA request.

Submit request to: Nicki Seidl, Library Director and Freedom of Information Officer
Ph: 708.422.8522

Email: seidl@evergreenparklibrary.org

Date Requested: _____ Time: _____

I hereby request to inspect copy* the following records:
(Please describe requested records as specifically as possible, attaching additional pages, if necessary.)

* There is no copying fee for the first 50 black and white standard-sized copies. The fee for additional copies is 15¢ per page. Actual cost will be charged for documents not of standard size, and for the recording medium (e.g. compact disk, tape, DVD), when applicable.

Is this request for a commercial purpose? Yes No

Are you requesting a fee waiver? Yes No

(If you are requesting a waiver of any fees for copying the documents, you must attach a statement of the purpose of the request, and whether the principal purpose of the request is to access or disseminate information regarding the health, safety and welfare or legal rights of the general public. 5 ILCS 140/6 (c)).

Name of Requester: _____

Signature of Requester: _____

Address: _____

Phone Number: _____ E-Mail: _____

Do not write below this line

Received by: _____ Date: _____ Time: _____

Forwarded to: _____ Date returned: _____