F.O.I.A. REQUEST

Note to Requester: Retain a copy of this request for your files.
If you eventually need to file a Request for Review with the Public Access Counselor, you will need to submit a copy of your FOIA request.

Name and Address of Public Body Receiving Request:
Winfield Park District
Thomas C. Bower, Executive Director
tomb@winfieldparkdistrict.com
0N020 County Farm Rd. Winfield, IL 60190 **Date Requested:** _____

Request Submitted By: ___ E-mail ___ U.S. Mail ___ Fax ___ In Person

Name of Requester(required): _____

Street Address(required): _____

City/State/County Zip (required): _____

Telephone (Optional): _____

E-mail (Optional): _____

Fax (Optional): _____

Records Requested: *Provide as much specific detail as possible so the public body can identify the information that you are seeking. You may attach additional pages, if necessary. _____
_____
_____
_____

Do you want copies of the documents? YES_____ or NO_____

--If available, Do you want Electronic Copies or Paper Copies? _____

--If available, Do you want Electronic Copies, in what format? _____

Is this request for a Commercial Purpose? YES _____ or NO _____
(It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1(c)).

Are you requesting a fee waiver? YES _____ or NO _____
(If you are requesting that the public body waive 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).