CITY OF SPRINGFIELD

FREEDOM OF INFORMATION ACT (FOIA)

RECORDS REQUEST FORM

FOIA System Number: _____

Please Type or Print Your Request:

Date: _____

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone Number: _____ **Email:** _____

Pursuant to the provisions of the Illinois Freedom of Information Act, I hereby request to inspect and/or receive a copy of the following records:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature

Records requested will be made available within five (5) business days from the date of this request. If the City is unable, or fails, to respond in five (5) business days, the City may, for specific reasons, request an additional five (5) days to respond to a Freedom of Information Act (FOIA) Request If the City fails to respond to a FOIA request within the time permitted, the City may not charge copying fees or treat the request as unduly burdensome. The City and the Requestor may mutually agree to extend the time period for response.

The first fifty pages of responses are free. After that, an additional fee of $0.15/page applies. There is no charge for submitting the response electronically (via email, cd or flash drive).

Any questions can be directed to the City Clerk's office at (217)789-2216 or via email at cityclerk@cwlp.com