FOIA REQUEST FORM - VILLAGE OF SHERMAN

Request for information from the Village of Sherman under the Illinois Freedom of Information Act PLEASE **PRINT** ALL INFORMATION NEATLY AND LEGIBLY

		FOIA Request Number: Indicate Year:				_ FOIA Number:	
Last Name		First				M.I	
Street Address							
City				State		Zip Co	de
Phone/_		_ 2nd Phone _	/_		Email:		
IS THIS REQUEST Under the Illinois following records	Freedom of In	formation Act	, I hereby	request (cl	heck one)		to inspect , the port # if known):
Date/Time Recor	ds Requested:	Mont	h		Year	Time	_
Signature of indi	vidual making r			•			
provisions of the Signature:				[Date:	or or provid	 ed for inspection.
Attach to this re	equest for the f			USE ONI		or, or provid	ea joi inspection.
This FOIA request	was submitted o				Fee:		
This FOIA request					By:		
Response to this F		e:			Notification By	/Date:	
Requested records	s provided on:				Ву:		
The requested rec of Information Act List names and titl	except as descri	bed in Village r	esponse le	tter.	· ·		ne Illinois Freedom
Signature of Freed	om of Information	on Act (FOIA) O	fficer:				Date
Check One:	USPS mailed.	l Email □Picke	d Up				
The requested rec	ords were prese	nted or inspect	ed by requ	estor at (loc	ation):		
or mailed by USPS	at	, on					
	(Time)	(1	Month)	(Day)		(Year)	