

Freedom of Information Act Request Form

Danvers Township Library

Date
Requestor's Name (Please Print)
Company
Address
City, State, ZIP code
Telephone number

Records Sought:

Requestor's Signature: _____

Mail to: Danvers Township Library, 117 E. Exchange Street, Danvers, IL 61732

If your request is denied, you may file an appeal to: Public Access Appeal Officer, Illinois Attorney General, 100 W. Randolph, 12th Fl., Chicago IL 60601.

For Department Use Only

Response:

Records Made Available: Date _____

Request denied, and reason:

Copies made _____ Yes _____ No

Fee paid _____

Date received

FOIA Officer Signature

Date of Reply