



Village of Westchester  
10300 Roosevelt Rd.  
Westchester, Illinois 60154  
(708) 345-0020 Fax: (708) 345-0799  
foia@westchester-il.org

FOIA Request # \_\_\_\_\_

DATE REQUESTED: \_\_\_\_\_

## FREEDOM OF INFORMATION ACT REQUEST FORM

Name/Company of Requester (required): \_\_\_\_\_

Street Address of Requester (required): \_\_\_\_\_

City/State/County Zip (required): \_\_\_\_\_

Telephone (required): \_\_\_\_\_ FAX (optional) \_\_\_\_\_

Signature (required): \_\_\_\_\_

\*E-MAIL (optional): \_\_\_\_\_

\*if possible, documents will be sent via e-mail. Not all records can or will be emailed. If you do not want records e-mailed please indicate the preferred method below.

Records Requested:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*please provide as much specific detail as possible so we can identify the information you are seeking. For example: report number, address, names, time and dates.

Do you want (CIRCLE) Electronic copies (email) or Paper Copies

Is this request for a commercial purpose? (CIRCLE) 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 commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1 (c).

**THE VILLAGE OF WESTCHESTER HAS SEVEN (7) DAYS TO RESPOND TO YOUR REQUEST**

-----Office Use Only-----

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_ Date Due \_\_\_\_\_  
Forward to: \_\_FD \_\_PD \_\_PW \_\_Admin \_\_BD \_\_Other \_\_\_\_\_ Date Complete \_\_\_\_\_