

Date Received:			
Date Due:			
Extension:			
FOIA Request #			

Request for Public Records under the Illinois "Freedom of Information Act" (5ILCS 140/1 et seg.)

		Date of Request
Requestor's Name	(Please Print)	I wish to: Inspect only (no copies) Pick up copies Receive copies via fax
Mailing Address	(Please Print)	Receive copies via e-mail
		The Village of Manteno will respond to this request within five
City	State Zip	(5) business days. If this request requires an extension, five (5) additional days will be requested and sent to you in writing.
Home Phone #	Work/Cell #	The Village of Manteno will respond to Commercial request within twenty-one (21) business days.
Fax #		
REQUESTOR'S SIGNATURE		E-mail Address (Please Print)
Is the information re	equested to be used for So	icitation/Commercial Purposes?
RESPONSE: Your request has been approved Your request has been denied Your request has been partially denied Please see the attached letter of explanation		FEES: Less than 50 pages No Charge pages @ .15 ea pages (oversize)
This request has been prepared		Total Due
Ву:		
Date:# of pages		FOIA Officer: Dawn Gesky