



Limestone Township Library District Freedom of Information Request

Date of Request _____

Requestor's Name (or business name, if applicable) _____

Phone number _____

Street Address _____

City _____

State _____

ZIP _____

Certification requested: _____ Yes _____ No

Description of Records Requested: _____

Is the reason for this request a "commercial purpose" as defined in the Act?

_____ Yes _____ No

Library Response (Requestor does not fill in below this line)

APPROVED

() The documents requested are enclosed.

() You may inspect the records at _____

on the date of _____.

() The documents will be made available upon payment of copying costs of \$

_____.

() For "commercial requests" only: the estimated time of when the documents will be available is _____, at the prepaid costs stated above.

DENIED

() The request creates an undue burden on the public body in accordance with Section 3(g) of the Freedom of Information Act, and we are unable to negotiate a more reasonable request.

() The materials requested are exempt under Section 7 _____ of the Freedom of Information E Act for the following reasons:

Individual(s) that determined request to be denied and title:

In the event of a denial, you have the right to seek review by the Public Access Counselor at (217) 558-0486 or 500 S. Second St., Springfield, IL 62705 OR you have the right to judicial review under Section 11 of FOIA.

() Request delayed, for the following reasons (in accordance with 3[e] of the FOIA): _____. You will be notified by the date of _____ as to the action taken on your request.

NOTE: This form cannot be MANDATORY under FOIA, but it is preferred. Failure to use it may result in the request not being properly or promptly processed.

FOIA Officer _____

Date of Reply _____

Approved by Library Board