

Hampshire Township Park District

Freedom of Information Act (FOIA)

Request for Information

Date: _____

From: _____

Name of Individual

Name of Agency or Organization

Street Address

City

State

Zip

Telephone – include area code

Email – for email responses

Description of records requested.

Please indicate the format you wish to receive the above requested records.

____ Inspect ____ Copied ____ Emailed ____ Certified

Please indicate the purpose for requesting the above records.

____ Noncommercial Purpose ____ Commercial Purpose ____ Other (please specify) _____

Signature of requestor

For Office Use Only

Request received by: _____ Date: _____ Time: _____

Response due by: _____ Date: _____ Time: _____

Additional time requested by: _____ Date: _____ Time: _____

Information provided by: _____ Date: _____ Time: _____

Denial sent by: _____ Date: _____ Time: _____

Information Given/Sent (circle one) to: _____ Date: _____ Time: _____

Method of delivery: ____ Mail ____ Email ____ Other _____

Authorized by: _____

Notes: _____

Additional cost for copies over 50 pages, color or oversize copies, certified copies, or recording media. \$__