

# HARVEY PUBLIC LIBRARY DISTRICT

15441 Turlington Avenue  
Harvey, IL 60426-3683

(708) 331-0757  
(FAX) 331-2835  
(TDD) 331-0767

## FOIA REQUEST

Date Requested: \_\_\_\_\_

Requested Submitted By: \_\_\_\_\_ Email \_\_\_\_\_ U.S \_\_\_\_\_ Fax \_\_\_\_\_ In Person

Name of Requestor: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Telephone (Optional): \_\_\_\_\_

E-mail (Optional): \_\_\_\_\_

Fax (Optional): \_\_\_\_\_

Records Requested: *\*Please provide as much specific detail as possible so the public body can identify the information that you are seeking. You may attach additional pages, if necessary.*

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Do you want copies of the documents? YES or NO

Do you want Electronic Copies or Paper Copies?

If you want Electronic Copies, in what format?

*\*Copies are 10 cents per page*

Is this request for a commercial Purpose? 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 that it is for commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1©).*

Are you requesting a fee waiver? YES or NO

*(If you are requesting that the public body waive any fees for copying the documents, you must attach a statement of the purpose of the request, and whether the principal purpose of the request is to access or disseminate information regarding the health, safety and welfare or legal rights of the general public. 5 ILCS 140/6©).*

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