



# Request for Information City of Casey Police Department Illinois Freedom of Information Act



Name: (Please Print) \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

I hereby request to inspect/copy the following records: (List records sought to be inspected) Circle whichever choice is appropriate.

Is this a request for Commercial Purposes? \_\_\_\_ Yes \_\_\_\_ No

Month, day, date, year, time records requested: \_\_\_\_\_

Signature of individual making request: \_\_\_\_\_

I hereby verify that I received on the date so noted those records requested which are available for inspection under the Freedom of Information Act.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only

The records so requested have been reviewed and are appropriate for release under the guidelines of the Illinois Freedom of Information Act Except for the following records:

\_\_\_\_\_

Reason access was denied to above listed records (list names and titles of all persons authorizing denial and specify exact section of the Illinois FOIA which applies):

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

Signature, title and department of employee reviewing records:

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

Of the records requested, copies were provided of the following:

\_\_\_\_\_

The records requested were presented to such an individual for inspections at:

\_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Time Date Month Year

Date Due, \_\_\_\_\_ Date Extension requested \_\_\_\_\_, New Date Due \_\_\_\_\_

Signature, title and department of employee presenting records for inspections:

\_\_\_\_\_ Fee Collected: \$ \_\_\_\_\_