

**City of Athens, Illinois**  
**Freedom of Information Act Request**

Submit Request To: FOIA Officer  
210 Dottie Bednarko Drive  
PO Box 268  
Athens, IL 62613  
Fax: 217-636-7949

Date and Time of Request: \_\_\_\_\_  
Submitted By: US Mail \_\_\_\_\_ Fax \_\_\_\_\_ In Office \_\_\_\_\_  
Name (Please Print): \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Signature of Individual Making Request: \_\_\_\_\_

Requested records:

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

Is this request for a commercial purpose?: NO \_\_\_\_\_ YES \_\_\_\_\_

*It is a violation of the FOIA for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if it is requested to do so by the public body. 5ILCS 140/3.1©*

Are you requesting a fee waiver?: NO \_\_\_\_\_ YES \_\_\_\_\_

*Waiver or reduction of the fee is in the public interest if the principal purpose of the request is to access and disseminate information regarding the health, safety, and welfare or the legal rights of the general public. 5 ILCS 140/6©*

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

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

**\*FOR OFFICE USE ONLY\***

Date Received: \_\_\_\_\_  
Received By: \_\_\_\_\_  
Date to Comply By: \_\_\_\_\_  
Complied By: \_\_\_\_\_  
Date and Time Complied: \_\_\_\_\_  
Denied By: \_\_\_\_\_  
Reason and Applicable Section of Illinois FOIA for Denial:  
\_\_\_\_\_  
\_\_\_\_\_