

City of Arcola

WRITTEN REQUEST FOR INSPECTION OR COPYING OF PUBLIC RECORDS

This request cannot be made in order to further any commercial enterprise.

1. Date of Request _____

2. Name and Address of Requester

3. Telephone Number of Requester

4. Describe in detail the public records that you are requesting and the purpose for which you are requesting the records.

5. Do you wish to:

Inspect the documents

Have copies made

6. Do you wish for the copies to be certified?

Yes

No

Fees for Freedom of Information Act requests are billed as follows:

Copies: \$0.50/page plus postage, if applicable.
Faxes: \$2.00 for the first page, \$1.00 for each additional page.

All fees are payable in advance.

The City of Arcola will respond to the above request within seven (7) days from the above date unless the City invokes one or more of the seven (7) reasons for an extension of time provided for in Section 3 (d) of the Freedom of Information Act.

Requests shall be made to:

**Carol Turner
Arcola City Clerk
114 N Locusts
PO Box 215
Arcola, IL 61910
Fax (217) 268-4966**