

South Beloit Public Library Freedom of Information Request

Requestor's Name (or business name, if applicable) _____

Date of Request _____

Phone Number _____

Street Address: _____

_____ Certification Requested: Yes ___ or No ___

City: _____ State: _____ Zip _____

Description of Records Requested:

Is the reason for this request a "commercial purpose" as defined in the Act? Yes ___ or No ___

Library Response (Requestor does not fill in below this line)

Approved:

- The documents you requested are enclosed.
- You may request the records at _____ on the date of _____.
- The documents will be made available upon the payment of copying costs of \$ _____.
- For "commercial requests" only: the estimated time of when the documents will be available is _____, at the prepaid costs stated above.

Denied:

- The request creates an undue burden on the public body in accordance with Section 3(g) of the Freedom of Information Act. We are unable to negotiate a more reasonable request.
- The materials requested are exempt under Section 7 _____ of the Freedom of Information Act for the following reasons: _____.

Individual that determined request to be denied and title _____

In the event of a denial, you have the right to seek review by the Public Access Counselor at (217) 558-0486 or 500 S. Second Street, Springfield, IL 62705 or you have the right to judicial review under Section 11 of FOIA.

Request delayed, for the following reasons in accordance with 3(e) of the FOIA: _____. You will be notified by the date of _____ as to the action on this request.

Note: This form cannot be MANDATORY under FOIA, but it is preferred. Failure to use it may result in the request not being properly or promptly processed.

FOIA Officer: _____

Date of Reply: _____