

**Maroa Public Library Freedom of Information Request**

Requestor's Name (or business name, if applicable)	Date of Request	Phone number
Street Address		Certification requested: Yes _____ No _____
City	State	Zip
Description of Records Requested:		
Is the reason for this request a "commercial purpose" as defined in the Act? ___Yes ___ No		

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

Approved	<input type="checkbox"/> The documents you requested are enclosed. <input type="checkbox"/> You may request the records at Maroa Public Library on the date of _____. <input type="checkbox"/> The documents will be made available upon payment of copying costs of \$ _____. <input type="checkbox"/> For "commercial requests" only: the estimated time of when the documents will be available is _____, at the prepaid costs stated above.
Denied	<input type="checkbox"/> 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. <input type="checkbox"/> The materials requested are exempt under Section 7 _____ of the Freedom of Information Act for the following reasons: _____ Individuals 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 <input type="checkbox"/> 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 taken on this request. <b>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.</b>

FOIA Officer	Date of Reply
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