VILLAGE OF POTOMAC

Request for Information Under the Illinois Freedom of Information Act

Name (print):	
Street Address:	
Home Phone:	
Person or Entity Represented:	
Public Records Requested (be specific):	
	Copy Both Certified? Y/N
Purpose for requesting information: (optional	(If for commercial purpose, must answer)
	Signature
	Date
Acknowledge	ement of Receipt
on	has provided me with the above information
Date	Signature
OFFI	CE USE
Date received:	Date response due:
# Pages (1st 50 free) # Documents Certified (\$1 per doc	Amount Paid Amount Paid
Signature & title of employee presenting records for	inspection. Date