VILLAGE OF WONDER LAKE
4444 THOMPSON ROAD
WONDER LAKE, IL 60097
NON EMERGENCY PHONE NO. (815) 728-0839
FAX NO (815) 728-1226

FREEDOM OF INFORMATION REQUEST

DATE: ______________________

REQUESTER’S NAME: _______________________________________________________

ADDRESS: _________________________________________________________________

PHONE: ______________________ FAX: ______________________

EMAIL: _________________________________________________________________

DESCRIPTION OF REQUESTED RECORDS (BE SPECIFIC AS POSSIBLE):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

PLEASE INDICATE IF YOU WISH TO INSPECT THE ABOVE CAPTIONED RECORDS OR
DESIREE A COPY OF THEM:

_____ INSPECTION        _____ COPY        _____ BOTH

IS THIS REQUEST FOR COMMERCIAL PURPOSES?       _____ YES       _____ NO

SIGNATURE OF REQUESTER

FOR OFFICE USE ONLY

DATE RECEIVED: ______________________ # OF PAGES: ______________________

DATE RESPONSE DUE: ______________________ FEE: ______________________

REQUEST DENIED: ______________________ WHY: ______________________

DATE LETTER SENT: ______________________

SENT VIA: _____ EMAIL        _____ FAX        _____ MAIL

FOIA OFFICER/DESIGNEE: ______________________

***PLEASE ACKNOWLEDGE RECEIPT BY SIGNING BELOW AND RETURN VIA FAX (815) 728-1226***

SIGNATURE ______________________ DATE: ______________________