

# FREEDOM OF INFORMATION REQUEST

Geneva Public Library District  
127 James St.  
Geneva, IL 60134  
Phone (630) 232-0780 Fax (630) 232-0881

Use of this form is optional but may help to expedite the Library's response to a request

Date of request: \_\_\_\_\_

Requester's Name (or business/organization name if applicable):  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of Records Requested: (attach additional pages if necessary)  
\_\_\_\_\_

## Library Response

(Requestor does not fill in below this line)

Request received by: \_\_\_\_\_

Date received: \_\_\_\_\_

### Approved:

\_\_\_\_\_ The documents requested are enclosed.

\_\_\_\_\_ The documents will be made available upon payment of copying cost \$ \_\_\_\_\_

\_\_\_\_\_ You may inspect the records at \_\_\_\_\_ on the date of \_\_\_\_\_.

### Denied:

\_\_\_\_\_ The request created an undue burden on the public body in accordance with Section (g) of the Freedom of Information Act and 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(s) the determined the request to be denied: \_\_\_\_\_

\_\_\_\_\_ 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 your request.  
\_\_\_\_\_

FOIA Officer: \_\_\_\_\_

Date of reply: \_\_\_\_\_