

MAHOMET POLICE DEPARTMENT



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Mahomet, IL 61853

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Dispatch: 217-333-8911

FOIA REQUEST

Date Requested: _____

Request Submitted By: E-mail U.S. Mail Fax In Person Phone

Name of Requestor: _____

Address: _____

Telephone: _____ E-mail: _____

Records Requested: **Provide as much specific detail as possible so the public body can identify the information that you are seeking. You may attach additional pages, if necessary.*

Do you want copies of the documents? YES or NO

--Do you want electronic or paper copies? _____

--If you want electronic copies, in what format? _____

Is this request for a Commercial Purpose? YES or NO

(It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1(c)).

FOR OFFICIAL USE ONLY

DATE REQUEST RECEIVED: _____ DATE REQUEST DUE: _____

EXTENSION REQUESTED: _____ EXTENSION DUE DATE: _____

DISPOSITION: COMPLY PARTIALLY COMPLY DENY

DATE REQUEST RESOLVED: _____

NUMBER OF PAGES: _____ COST: _____