

**GENEVA TOWNSHIP ROAD DISTRICT
FREEDOM OF INFORMATION ACT (FOIA)
REQUEST FORM**

Date Requested _____

Requestor's Name _____

Telephone (optional) _____

Street Address _____

City/State/County Zip (required) _____

E-mail (optional) _____

Fax (optional) _____

Information/records being requested (be specific). You may attach additional pages, if necessary. Also indicate how you prefer to receive your response: by mail, e-mail, fax or pick up in person.

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)).

Requestor's Signature

***FOIA requests are accepted in person, by mail, fax or e-mail at the following location:
Geneva Township Road District (office hours 8:30 a.m. to 4:30 p.m. Monday – Friday)
Attention: FOIA Officer Sheri McMurray
400 Wheeler Drive, Geneva, IL 60134
Phone: 630/232-3608 Fax: 630/232-9289
E-mail: smcmurray@genevatownship.com***