



Public Records Examination Request

- This form is for requests filed through the Illinois Freedom of Information Act.
- You can email your completed form to foia@dupageforest.org; fax it to (630) 933-7093; mail it to Freedom of Information Officer, Forest Preserve District of DuPage County, P.O. Box 5000, Wheaton, IL 60189; or deliver it to 3S580 Naperville Road in Wheaton 8 a.m. – 4:30 p.m. Monday – Friday excluding holidays.
- The District will respond within five business days after the date of the receipt of the request except in specific circumstances stipulated by the Freedom of Information Act (5 ILCS 140) and will notify you if your request is denied.

Records Requested *Please be specific:*

Your Name _____ Email _____

Organization, Business, Agency _____

Mailing Address _____

Phone Number _____ Fax Number _____

Is this request for a commercial purpose?

Yes	No	The District will respond to a commercial request within 21 business days after the date of the receipt of the request. It is a violation of the Freedom of Information Act to knowingly obtain a public record for a commercial purpose without disclosing so if asked (5 ILCS 140/3.1 (c)).
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How would you like to receive the records?

I will examine them at the District headquarters 8 a.m.-4:30 p.m. Monday-Friday excluding holidays. The District will let you know when the records are available within five business days after the date of the receipt of the request. You can then call (630) 933-7090 to make an appointment at 3S580 Naperville Road in Wheaton.

I would like printed copies.

Before the District releases the copies, you must pay in-person or by mail for any copy, certification, or mailing charges. There is no charge for the first 50 black-and-white letter- or legal-sized copies; additional copies are 15 cents per page. For color or oversized copies, the District will charge you the actual cost of the copies.

I would like the copies mailed to the address above.

I would like electronic copies. There is no copy fee for files sent via email or ShareFile.

Signature _____ Date _____

For Office Use Only

Received By Signature _____ Date _____