



FREEDOM OF INFORMATION FORM

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Send all requests to: kmcgrier@broadview-il.gov Put "FOIA" in Subject field

Date Requested: _____

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

Name of Requester: _____

Street Address: _____

City/State/County Zip (required): _____

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Records Requested: *Provide as much specific detail as possible. You may attach additional pages, if necessary.

Do you want PAPER or ELECTRONIC copies of the documents? PAPER ELECTRONIC

The first 50 copies are free, each additional copy will cost .15 cents per page.

Is this request for a Commercial Purpose? YES 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)).

Are you requesting a fee waiver? YES NO (If you are requesting that the public body waive any fees for copying the documents, you must attach a statement of the purpose of the request, and whether the principal purpose of the request is to access or disseminate information regarding the health, safety and welfare or legal rights of the general public. 5 ILCS 140/6(c)).