

FREEDOM OF INFORMATION ACT REQUEST FORM

City of Columbia 208 S. Rapp Ave. Columbia, IL 62236 618.281.7144 x 104

TO: Freedom of Information Officer, City of Columbia 208 S. Rapp Avenue, P.O. Box 467, Columbia, Illinois 62236-0467

(Please Print)

Requester Name:					
Address:					
No.	Street	City	/	State	Zip Code
Phone #:					
E-mail Address	:				
	v the public records sible. If known, inc	-	•		search, be as
The records above	are requested for:	Inspection [Сору		
	nd white photocopies w		harge for the fire	st fifty (50) p	ages. Requester
Is this request bein	g made for commercial p	urpose?	☐ No		
record for sale, resinformation Act to be Columbia. Each r	al purpose" means the us sale, or solicitation or ad knowingly obtain informat equest for a public reco- part of a single or multip	vertisement for sales ion for a commercial pure rd or category of publi	or services. <u>It is</u> urpose without dis c records made	a violation of a viol	of the Freedom of ntent to the City of f this requirement
an extension of tim	oia will respond to this requence up to five (5) additional nse within twenty-one (2	days, the requester wi			
Requester Signat	ure		Date		
Mail or deliver to:	Douglas Brimm, 208 S. Rapp Facsimile: (618) 281-5477, 6				
	Kelly Mathews, 208 S. Rapp Avenue, P.O. Box 467, Columbia, IL 62236-0467 Facsimile: (618) 281-5477, e-mail: kmathews@columbiaillinois.com				
For Police Requests:	Chief of Police Jason Donjon, FOIA Officer, 1020 N. Main St, Columbia, IL 62236 Facsimile: (618) 281-6644, e-mail: FOIA@columbiaillinois.com				
Office Use Only Request received by:		Date:	Date Due:	E	
Inspection: Pickup M Certification: Reason for denial:		Date: nents made available on: y:	 Ente	Fees collected ered into file on:	OIA #: : \$
	en responses for file. Name an	d title of officer issuing the de	nial		