

**MORRIS POLICE DEPARTMENT
REQUEST FOR RECORDS UNDER THE FREEDOM OF INFORMATION ACT**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) _____ Date of request: _____ Time: _____

Records Requested: **Please provide as much specific detail as possible so the Morris Police Department can identify the information that you are seeking. You may attach additional pages, if necessary.*

Please indicate your choice: Copies _____ Inspection _____

Do we have your permission to redact dates of birth from the requested records so that pre-authorization by the Public Access Counselor is not necessary? YES or NO

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)).

Are you requesting a fee waiver? YES or 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 104/6(c)).

The City of Morris Police Department will respond to this request within five (5) business days. All City of Morris Police Department FOIA requests will be reviewed by a FOIA Officer at the Morris Police Department, 200 E. Chapin Street, Morris, Illinois 60450. After review, you will receive either a verbal or written notification from the department designating the date and time the records may be inspected or picked up.

Signature of person making request

****Note to Requester: Retain a copy of this request for your files. If you eventually need to file a Request for Review with the Public Access Counselor, you will need to submit a copy of your FOIA request.****