

Charmaine Kaufman
Fremont Township Clerk
Clerk@fremonttownship.com
22385 W. IL Rt. 60
Mundelein, IL 60060

Date: _____

OFFICIAL WRITTEN REQUEST FOR INFORMATION

I hereby request a copy of the following public records from Fremont Township:
(Please be specific so we can locate the correct records for you)

- Please indicate if you would like to inspect _____ or copy _____ records.
- An appointment is necessary to inspect public records. There is a charge of \$.15/copy after first 50 copies.
- Your request will be responded to within five (5) working days after receipt of this request. If additional time is needed, you will be notified. If your request is denied, you may file an appeal as allowed in the Illinois Compiled Statutes Section 3 (5ILCS 140/3).

COMPANY: _____

NAME: _____

ADDRESS: _____

PHONE/FAX: () _____ () _____

E-MAIL _____

SIGNATURE OF REQUESTOR

FOR OFFICE USE ONLY:

Date Request Received _____

Date Responded _____

Request Fulfilled _____

Request Denied: Full _____
Partial _____

Copies of the above records were copied or inspected and delivered to said individual on

_____, 201__ at _____

Fremont Township FOIA Officer