

1770 W. Centennial Place, Addison, IL 60101-1076 Phone 630.620.4500 Fax 630.620.4598 www.nedsra.org

## Freedom of Information Act (FOIA) Request for Public Records Form

Date:	_
To: <u>Jerry Barton</u> <u>Freedom of Information</u>	n Officer_
I hereby request toinspect_copy* the (Please describe requested records as specifically	e following records: as possible, attaching additional page if necessary.)
types of records with set fees, Actual cost. Cer Actual cost. Commercial Records Request, Actual	First 50 pages Free. Additional pages \$0.15 per side. Other tification \$1.00 per record, plus copy cost. Mailing costs, il cost to retrieve and transport offsite records and \$10/hr. t 8 hours. Other fees/costs as may be provided for under
Is this request for a commercial purpose?	Yes No No
Are you requesting a waiver or reduction of cop	ying fees? Yes No
If yes, what is the purpose of this reque	st?
Requester's (Printed) Name	Requester's Address
Requester's Signature	Requester's Phone Number
	E-Mail Address
DO NOT WRITE IN THIS SPACE	NEDSRA FOIA Officer:  Jerry Barton CTRS  EXECUTIVE DIRECTOR
DATE RECEIVED BY AGENCY	630.620.4500 X4040 jbarton@nedsra.org