

BUREAU HENRY STARK REGIONAL OFFICE OF EDUCATION
107 SOUTH STATE STREET
ATKINSON, IL 61235
Phone 309-936-7890

FREEDOM OF INFORMATION ACT

Request for Public Records

FROM:

NAME (Print)

ADDRESS (Print)

CITY, STATE, ZIP (Print)

PHONE NUMBER

DESCRIPTION OF REQUESTED RECORD(S):

Please indicate if you wish to inspect the above captioned records or wish a copy of them.

_____ Inspection _____ Copy _____ Both

Do you wish to have copies certified? _____ Indicate which records are to be certified by placing an * prior to the description of the requested record above.

_____ Please check if this request for records is being made for a commercial purpose. Section 2 of the Freedom of Information act states: "Commercial purpose means the use of any part of a public record or records, or information derived from public records, in any form for sale, resale, or solicitation of advertisement for sales or services. For purposes of this definition, requests made by news media and non-profit, scientific, or academic organizations shall not be considered to be made for a "commercial purpose" when the principal purpose of this request is (i) to access and disseminate information concerning news and current or passing events, (ii) for articles of opinion or features of interest to the public, or (iii) for the purpose of academic, scientific, or public research or education. Section 3.1 states: "It is a violation of this 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."

_____ Please check if a fee waiver or reduction is being requested. Section 6 of the Freedom of Information Act states: “Documents shall be furnished without charge or at a reduced charge, as determined by the public body, if the person requesting the documents states the specific purpose for the request and indicates that a waiver or reduction of the fee is in the public interest. Waiver or reduction of the fee is in the public interest if the principal purpose of the request is to access and disseminate information regarding the health, safety, and welfare or the legal rights of the general public and is not for the principal purpose of personal or commercial benefit.”

Please indicate your reason for requesting a fee waiver: _____

FOR OFFICE USE ONLY:

Date Received

Date Response Due