234 S. State St. P.O. Box #457 Hampshire, IL 60140



## FOIA REQUEST FORM

| NAME:  |            |            |            |                |
|--|------------|------------|------------|----------------|
| COMPANY NAME:  |            |            |            |                |
| ADDRESS:   |            | CITY:      | STATE:     | ZIP:           |
| PHONE #:   |            | E-MAIL:    |            |                |
| DATE OF REQUEST:   |            |            |            |                |
| PLEASE SPECIFY THE<br>WHETHER YOU WISH<br>RECORD(S). ALSO, IDE | TO INSPECT | THE COPIES | OR RECEIVE | A COPY OF SUCH |
| COMMERCIAL   | COPY       | INSPI      | ECT        | CERTIFY        |
|  |            |            |            |                |

THE VILLAG EOF HAMPSHIRE WILL RESPOND TO THE ABOVE REQUEST WITHIN FIVE (5) BUSINESS DAYS FROM THE DATE OF RECEIPT. COMMERCIAL REQUESTS WILL BE RESPONDED TO WITHIN TWENTY-ONE (21) BUSINESS DAYS FROM THE DATE OF RECEIPT.

SIGNATURE

FOR OFFICE USE ONLY:

DATE RECEIVED: \_\_\_\_\_

DATE COMPLETED: \_\_\_\_\_