

City of Ottawa
301 W. Madison Street
Ottawa, IL 61350



Shelly L. Munks, FOIA Officer
815-433-0161 ext. 17

REQUEST FOR INFORMATION PER THE FREEDOM OF INFORMATION ACT

1. Name _____
2. Street Address _____
3. City, State, & Zip _____
4. Telephone number _____
5. Email address (optional) _____
6. Today's Date _____ Time of Request _____
7. Request submitted by (please check one) ___ email ___ US Mail ___ Fax ___ In person
8. Is this request for a commercial purpose? ___ Yes ___ No
9. Are you requesting a fee waiver? ___ Yes ___ No If yes, please state reason: _____

10. Describe in detail the public records you are requesting and whether you wish to inspect the records or have copies of the records. If you choose copies, please also state whether the records need to be certified: _____

The City of Ottawa FOIA Officer will respond within 5 working days from the date of this request unless one or more of the reasons for an extension of time provided for in Section 3 (e) of the FOIA Act are invoked by the City.

11. Signature of requester _____

For Office Use Only

For Completion by FOIA Officer:

Date received _____

Date response is due _____

Date completed _____

Method of delivery ___ email ___ US Mail ___ Fax ___ In person