WAYNE TOWNSHIP, ILLINOIS
A-1.
REQUEST FOR INSPECTION OR COPYING OF PUBLIC RECORDS

1. Identification of person requesting information:
   a) Name:_____________________________________________
   b) Address:__________________________________________
   c) Telephone:________________________________________

2. Additional information relating to organization. If this request is on behalf of a public body or a business, civic or other organization, please state the following:
   a) Name of Organization:________________________________
   b) Address of Organization:_______________________________
   c) Office or title within organization of person requesting information:________________________

3. Description of public records requested. Please describe the records requested with sufficient detail to allow Township office personnel to determine whether such public record exists and to locate it within a reasonable time:

   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

(If additional space is required, use the reverse side of this sheet).

4. Specify documents of which copies are requested:
   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

5. Will any part of the requested records be used in any form for sale, resale or solicitation or advertisement for sales or services?

   _______________________________________________________
   ____________________________
   Signature

For Township Use Only

Date Received________________ Time Received________________ Date Response Due________________

Notations regarding oral communications or other items____________________________________

FOIA Form 500