REQUEST FOR PUBLIC RECORDS UNDER FREEDOM OF INFORMATION ACT (FOIA)

Submit to:

Karen Winger, FOIA Officer

Village of Williamsville

141 W. Main St.

Williamsville, IL 62693

Fax – 217-566-2105 – email kwinger@williamsville.illinois.gov

Date of Request:			
Submitted by:email	U.S. Mail Fax	in person	
Name:			_
Address:			
City, State, Zip:			
		mail:	
Requested records: (Please prov	vide as much detail as poss	ible, use additional page(s) as needed.	
Is this request for a Commercial			·
	•	n a public record for a commercial ose, if it is requested to do so by the	
I wish toinspect _	copy the re	cords. Standard black/white copies will be	no charge for the
first 50 pages. Requested recor	ds over 50 pages will be 15	cents per page.	
Signature			
	Office	e use only	
Date & Time Complied:			
Denied by:	Reason [Denied:	

Unless otherwise notified, your request for Public Records will be complied by within 5 working days after receipt.