

County Administrator
Whiteside County Courthouse
200 E. Knox Street
Morrison, IL 61270
Voice: 815 / 772 - 5100
Fax: 815 / 772 - 5252
email: wcadmin@whiteside.org



**THE COUNTY OF WHITESIDE, ILLINOIS
FREEDOM OF INFORMATION ACT REQUEST FORM**

DATE: _____ (Requests will be answered within 5 business days; 21 business days for commercial requests.)

REQUESTOR:

Name: _____

Address: _____

Telephone #: _____

INFORMATION REQUESTED (Please be as specific as possible):

Will the information requested be used for a commercial purpose(Y/N): _____

I desire to _____ inspect / _____ receive a copy / _____ receive a certified copy.

If copies are to be sent, please indicate where the information should be sent:

. . . if by e-mail to: _____

. . . if by fax to: _____

. . . if by mail to: _____

Copying Charge: 1st 50 pgs - no charge; \$0.15/pg thereafter; Digital Media - Actual cost;\$1 per record for certification.

The County is not obligated to prepare any public record which was not maintained or prepared at the time of the request.

Response to Request

_____ request complied with by _____

_____ request denied because _____

(You have the right to appeal under section 11 of 5 ILCS 140(Freedom of Information Act))

_____ additional time to review request needed because _____

answer will be provided by _____

County Administrator