

**FREEDOM OF INFORMATION REQUEST**

GRANT PARK POLICE DEPARTMENT

DATE SUBMITTED

REQUEST NO.

**INSTRUCTIONS:** PLEASE PRINT OR TYPE. SUBMIT ONE FORM FOR EACH RECORD REQUESTED. YOUR REQUEST SHOULD REASONABLY DESCRIBE THE RECORD SOUGHT. THE GRANT PARK POLICE DEPARTMENT WILL RESPOND TO A REQUEST FOR A PUBLIC RECORD WITHIN 5 BUSINESS DAYS AFTER ITS RECEIPT BY THE FREEDOM OF INFORMATION SECTION (FOIA). A RESPONSE TO CERTAIN REQUESTS MAY REQUIRE UP TO 5 ADDITIONAL BUSINESS DAYS, IN WHICH CASE YOU WILL BE NOTIFIED. YOU WILL ALSO BE NOTIFIED SHOULD YOUR REQUEST BE DENIED.

**REQUESTER INFORMATION**

PRINT NAME (LAST - FIRST - M.I.)		SIGNATURE	
STREET ADDRESS		CITY	STATE
			ZIP CODE
EMAIL ADDRESS		TELEPHONE NO.	

**RECORDS SOUGHT (Check all boxes that apply.)**

<input type="checkbox"/> ORIGINAL CASE INCIDENT REPORT	REPROT NO.	DATE OF INCIDENT	LOCATION
<input type="checkbox"/> ARREST REPORT	ARRESTEE NAME	REPORT NO.	DATE OF ARREST
			LOCATION
<input type="checkbox"/> CONTACT HISTORY REPORT	NAME	DATE OF BIRTH	DATE RANGE
<input type="checkbox"/> OTHER RECORDS (Describe other records sought on the lines below.)			

MAIL OR BRING THIS REQUEST TO: GRANT PARK POLICE DEPARTMENT, RECORDS DIVISION, 100 E. TAYLOR ST, GRANT PARK, ILLINOIS 60940, MONDAY THROUGH FRIDAY, EXCEPT HOLIDAYS, FROM 8:00 A.M. TO 3:00 P.M.

**FREEDOM OF INFORMATION SECTION**

F.O.I.A. MEMBER ASSIGNED	DATE RECEIVED	DUE DATE
METHOD RECEIVED		
<input type="checkbox"/> EMAIL <input type="checkbox"/> FAX <input type="checkbox"/> MAIL <input type="checkbox"/> WALK-IN <input type="checkbox"/> INTERNAL <input type="checkbox"/> ONLINE <input type="checkbox"/> OTHER		

**NOTES :**

APPROVED      DENIED                      MAILED                      DATE MAILED