

Carol Stream Fire Protection District

365 Kuhn Road Carol Stream, IL 60188

Phone: 630-668-4836 Fax: 630-668-4877 foia@carolstreamfire.org

For Office Use Only					
Date Rcvd:					
Time:		am	pm		
Request Received By:	☐ U.S. Mail □E-Mail				

F	FREEDOM OF INFORMATION ACT REQU	EST FOR INFO	RMATION		
Name: _ Mailing Address: _		Phone:			
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(Pro	Public Records Reque ovide as much specific detail as possible. You may at		es if necessary.)		
Are you requesting to review or copy these records? Review Copy (Please note that if a fee is associated with this request, it must be paid before copies are made.)					
	e is associated with this request, it must be paid before co	ppies are made.) — — — — — -			
	District Response (for office use only)				
Response: Date:	Notes:				
Type of Response: \Box					
	Format b/w copies # pages		(first 50 pages free)		
	☐ color copies # pages				
	Other				
	Requested Extension - Date Request for Extension letter				
	Denial Based on Exemption 7(1)(c) or 7(1)(f) - Date Notic	e to PAC sent:			
	Denial - Date Denial Notification sent				

If you believe records are being improperly withheld under FOIA, you may submit your request for review to the Public Access Counselor in the Office of the Attorney General: Public Access Counselor, Office of the Attorney General, 500 S. 2nd Street, Springfield, Illinois 62706; Phone: 312-814-5526 or 877-299-FOIA (877-299-3642); Fax: 217-782-1396; E-mail: publicaccess@atg.state.il.us. You may also seek judicial review pursuant to FOIA.