## Marengo Police Department FOIA Request Form 142 E. Prairie Street, Marengo, IL. 60152

Agency/Company Name: Address:	Requestor Name:	
Address:	Agency/Company Name:	
Email:	Address:	<del> </del>
Description of requested record(s) sought. Please be as specific as possible. Include as much information as possible to assist with the retrieval of the documents.  Request is made to Inspect and/or Copy  The City of Marengo will respond to or deny a request for public records within 5 days (21 days for commercial requests) of its receipt. Please be sure email address is printed legibly above if requesting a response be sent by email.  I certify that the information herein requested is/ is not for commercial purposes.  Name of requestor (print): Signature: Preferred method of delivery: Mail Email Fax Pick-Up  Return this document upon completion to:  City of Marengo Attri: Police FOIA Officer 142 E. Prairie Street Marengo, IL 60152  FOIA Email: pdfoia@cityofmarengo.com		
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[ ] Request Denied [ ] Request partially denied  Signature of Employee Title	Requested for commercial purposesYes No Du	ue date: Date provided:
Signature of Employee Title	Copying/Certifying fee: \$Paid:	
		[ ] Request partially denied
Notes:		
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