

**ILLINOIS FREEDOM OF
INFORMATION ACT
REQUEST FOR PUBLIC
RECORDS**

File Date

To: **Patty Moreno**
204 Hillcrest Ave.
Rochelle, IL 61068

From: _____
Address: _____

Date:

DESCRIPTION OF REQUESTED RECORD(S):

Please indicate if you wish to inspect the above records or wish a copy of them:
_____ Inspection _____ Copy (.25 per side)

Do you wish to have copies certified? _____

For Office Use Only

_____ Date Received _____ Date Response Due

FOI Officer Initial _____ Approved _____ Disapproved _____

CERTIFICATION

**STATE OF ILLINOIS
COUNTY OF OGLE**

I, Patty Moreno, Hillcrest Village Clerk, do hereby certify that this document is a true and correct copy of the original record which is on file in the Office of the Hillcrest Village Clerk, Ogle County, Hillcrest, Illinois.

Date _____

Hillcrest Village FOIA Officer