



**FREEDOM OF INFORMATION OFFICER  
ILLINOIS STATE TREASURER'S OFFICE  
400 WEST MONROE, SUITE 401  
SPRINGFIELD, IL 62704**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E- mail: \_\_\_\_\_

Please provide a brief description of the public records being sought, being as specific as possible. Is this request for inspection of the public records listed below or for copies of the requested records?

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Please attach any additional documents to this form.