

FREEDOM OF INFORMATION OFFICER ILLINOIS STATE TREASURER'S OFFICE 1 EAST OLD STATE CAPITOL PLAZA SPRINGFIELD, IL 62701 FOIA@ILLINOISTREASURER.GOV

Name:		
Address:		
		Zip Code:
Telephone Number:	E- mail:	
Please provide a brief descri	ption of the public records	s being sought, being as specific
as possible. Is this request for	or inspection of the public	records listed below or for copies
of the requested records?		

Please attach any additional documents to this form.