



COOK COUNTY SHERIFF'S OFFICE FREEDOM OF INFORMATION ACT REQUEST



DATE REQUESTED: _____

REQUESTOR NAME: _____
FIRST MIDDLE LAST

ADDRESS: _____
NUMBER STREET APT. NUMBER CITY STATE ZIP CODE

DAY PHONE NUMBER: _____ CELL PHONE NUMBER: _____

E-MAIL ADDRESS: _____

METHOD REQUEST WAS SUBMITTED: IN PERSON U.S. MAIL E-MAIL

RECORDS SOUGHT (please provide as much specific detail as possible so the public body can identify the information that you are seeking. You may attach additional pages, if necessary):

CASE/REPORT# _____ CASE/REPORT TYPE _____

ADDITIONAL INFORMATION

(Please include all Pertinent information such as DATE OF BIRTH, SOCIAL SECURITY NUMBER, etc. that can assist in expediting this request)

IS THIS REQUEST BEING MADE FOR A COMMERCIAL PURPOSE: YES NO

It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1(c).

PLEASE RETURN YOUR REQUEST VIA U.S. MAIL OR BY E-MAIL TO:

COOK COUNTY SHERIFF'S OFFICE
ATTN: FOIA OFFICER
RICHARD J. DALEY CENTER
50 W. WASHINGTON, ROOM 704
CHICAGO, I LLINOIS 60602
E-Mail: ccso.foiaofficer@ccsheriff.org

In person requests may be submitted to Room 701
For further inquiries, please call (312) 603-6444

PREFERRED RESPONSE: IN PERSON U.S. MAIL E-MAIL

FOR OFFICE USE ONLY:

DATE RECEIVED: _____ REQUESTOR CONTACTED? YES _____

EXTENSION: _____

DATE DUE: _____ DELIVERED VIA: U.S. MAIL E-MAIL
 IN PERSON

DATE SENT TO REQUESTOR: _____ VERIFIED BY: _____