



**OAK PARK and  
RIVER FOREST  
HIGH SCHOOL**

Lisa Evans  
Executive Assistant/Clerk of the Board/FOIA Officer  
**OAK PARK AND RIVER FOREST HIGH SCHOOL**  
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**REQUEST FOR INSPECTION OR COPYING OF PUBLIC RECORDS UNDER  
THE ILLINOIS FREEDOM OF INFORMATION ACT (FOIA)**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE NUMBER** \_\_\_\_\_

**PERSON ENTITY REPRESENTED IF ANY** \_\_\_\_\_

**PUBLIC RECORDS REQUESTED:** *Describe in detail the records you are requesting and state whether you wish to inspect or copy such records at a cost of:*

- \$.15 per black and white copy after the first 50 pages
- \$.25 per color copy after the first 50 pages.
- Certified copies of the public records (\$1.00)



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Please indicate below if you wish to:

- Inspect the records
- A copy of the records
- Both

Do you wish to have copies certified?

Yes

No

Is this FOIA for commercial purposes?

Yes

No

How would you like to receive the responses?

- Via mail
- Electronically
- Pick up

By my signature, I, the undersigned, agree that the information obtained will not be used to violate individual privacy or to dispute the duly undertaken work of the public body. ([See Freedom of Information Act – Sect 1](#))

Signature \_\_\_\_\_

Date \_\_\_\_\_