

RECEIVED
APR 08 2016
SCHOOL DIST 81

Freedom of Information Act Request form

On the 7th day of April, year 2016, at the hour of 3:30 PM, the following individuals ~~appeared in person~~ at the office of Schiller Park School District 81 and requested the following records: faxed

Name Mary Jane Goldthwaite Phone _____ Home _____ Cell _____

Address _____ City Schiller Park

Records sought: email

Any and all contracts for special education services entered into by Schiller Park School District 81 with the Jeannine Schultz Memorial School, Park Ridge, Illinois since January 1, 2015 to the present date

Paper copy from paper or electronic source (50) pages or less)	No charge
Paper copy from paper or electronic source (51) pages or more)	\$.15 per page
Copy of audio or video material	Cost of media

> Requesting in Electronic format

Please send to _____

Mary Jane Goldthwaite
Requestor's Signature
Title _____

ys to assemble. District office staff will notify you

Numbers of copies made _____ Cost \$ _____

I hereby certify the above requested records were presented to me, for inspection or copies provided on _____ day of _____, year _____.

Requestor's Signature _____

Checks are made payable to School District 81

If additional time is needed, we will notify the requestor in writing within 5 business days after the receipt of the request of the statutory reason for the extension and when the requested information will be produced.