## NORTH AURORA POLICE DEPARTMENT

REQUEST FOR EXAMINATION OR COPY OF RECORDS

Please complete this shaded box only.	Date of Request:
Name:	Date of Birth:
Address:	Telephone:
Date / Time of Incident:	Case Number:
Location of Incident:	
	on / Copying:
Signature:	Date:
Description Description	
Response to Information Request	By:
Date of compliance with request:	by (custodian of records)
Date of receipt of records:	_ By: (requestor)
Copying fee paid: \$	
U We are extending the time for response to your requ	uest for an additional 7 working days under Section 140/3(d)
of the Act due to: (i – vii)	
	/:
Date of time extension notification:	Ву:
Your request is "unduly burdensome" and is denied	. Responding to this request will disrupt the duly-
undertaken work of this department. We have extende	ed the opportunity to you to confer with us in an attempt to
reduce the request to manageable proportions and you	a have failed to do so. The reasons this request is unduly
burdensome and the extent to which it is are:	
	inspection, copying, or disclosure under Section 7 of the
Act for the following reasons:	
Date of denial of request:	Ву:

See reverse side for your legal right to appeal this decision

Right to	o Appeal
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If your request has been denied, in-whole or in-part, you have the right to appeal this decision in writing to:

(head of the public body)	(	(head	of the	public	body)
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Response to Administrative Appeal
Your appeal from the decision to withhold records from inspection and copying has been reviewed. My
determination is that the withholding of records from inspection and copying is:
Sustained in-whole
Sustained in-part
The reasons for this decision are:
If the denial of your request has been sustained in-whole or in-part, you have the right to judicial review of this
appeal and final decision under Section 11 of the Illinois Freedom of Information Act.
Date of Administrative Appeal: By: