



Attn: FOIA Officer
SURS
1901 Fox Drive
Champaign, IL 61820
FOIA_Officers@surs.org

Freedom of Information Act Request Form (FOIA)

Requestor's Name: _____

Company: _____

Address (street and/or PO Box): _____

City: _____ State: _____ ZIP Code: _____ Phone Number: _____

RECORDS SOUGHT (be as specific as possible)

☐ Printed ☐ Electronic data processing records (specify format) ☐ Excel Spreadsheets ☐ CD-ROM ☐ Other

Special run instructions:

Requestor's Signature: _____ Date: _____

Return completed FOIA Request forms to:

SURS: Attn: FOIA Officer 1901 Fox Dr. Champaign, IL 61820; or email to FOIA_Officers@surs.org

If your request is denied, you may file an appeal to: Public Access Appeal Officer, Illinois Attorney General, 500 S. 2nd Street, Springfield, Illinois 62701 or public.access@ilag.gov

(FOR INTERNAL USE ONLY)

RESPONSE:

Records made available: ☐ Yes ☐ No Date: _____

Request denied, and reason: _____

Copies made: ☐ Yes ☐ No Number: _____ ☐ Media Exemption Fee Paid: \$ _____

Other (attach correspondence) _____