**Section 1901.APPENDIX A Request for Public Records**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TO: Freedom of Information Officer  Illinois Health Facilities Authority  180 North Stetson Avenue, Suite 1100  Chicago, Illinois 60601 | | | FROM: |  | |
|  | | |  | Name | |
|  | | |  | Address | |
|  | | |  | ZIP  ( ) | |
|  | | |  | Telephone | |
| Description of Requested Record(s): | | | | | |
| Please indicate if you wish to inspect the above-captioned records or wish a copy of them: | | | | | |
| Inspection | Copy | | | | Both |
| FOR OFFICE USE ONLY: | |  | | | |
| Date Received | |  | | Date Response Due | |

(Source: Amended at 20 Ill. Reg. 358, effective December 26, 1995)