NOTICE FOR RECORDS INSPECTION AND/OR COPYING

Date:	
To: [Requester]	_
[Address]	_
[Address]	_
This will confirm the District's receipt on <u>[da</u> to inspect and/or copy the record	
The following record(s) responsive to your requand downloaded from the District's we	•
The following additional record(s) responsive to your request may be inspected and/or copied during business hours at	
Please contact me to schedule your visit to inspect and/or copy the records, or if you have any questions.	
	Keeley Christensen
	Freedom of Information Officer
	c/o Central Administrative Office
	500 E. Main Street, Gardner, IL 60424
	815-237-2176
	kchristensen@gswh73.org