

Freedom of Information Act (FOIA)

I. A brief description of our public body is as follows:

- A. Our purpose is to change lives by opening doors to education and entertainment, providing access to diverse resources, and offering opportunities to enrich our community.
- B. An organizational chart
Board of Trustees → Library Director → Assistant Librarian → Certified Substitutes → Paraprofessional substitutes
- C. The total amount of our operating budget for: **FY2024 is \$200,300**
Funding sources are property taxes, state and federal grants, fines, charges, and donations.
Tax levies are:
 - 1. Corporate purposes (for general operating expenditures)
 - 2. IMRF (provides for employee's retirement and related expenses)
 - 3. Audit (for annual audit and related expenses)
 - 4. Maintenance (for maintaining the building)
 - 5. Tort Liability (for insurance premiums, risk management, attorney's fees and related expenses, unemployment, and worker's compensation insurance)
- D. The office is located at this address: 1134 E. 3100 North Road Suite C. Clifton, IL 60927
- E. We have approximately the following number of persons employed:
 - 1. **Full-time 2**
 - 2. **Part-time 12**
- F. The following organization exercises control over our policies and procedures: The Central Citizens' Library District Board of Library Trustees, which meets monthly on the 3rd Thursday of each month, 6:00 p.m., at the Central Citizens' Library – 1134 E. 3100 North Road Clifton, IL 60927
Its members are: **Karen Alexander (Vice President), Ann Blasey, Lavonne Gillespie (Secretary), Tahlia Guimond, Sharron Kreider, Robert Lemenager (President), and Scott Senffner (Treasurer)**
- G. We are required to report and be answerable for our operations to: Illinois State Library, Springfield, Illinois. Its members are: **State Librarian, Alexi Giannoulis (Secretary of State);** Director of the State Library; and various other staff.

II. You may request the information and the records available to the public in the following manner:

- A. Use request form (see attached).
- B. Your request should be directed to the following individual: Sarah Schoon.
- C. You must indicate whether you have a "commercial purpose" in your request.
- D. You must specify the records requested to be disclosed for inspection or to be copied. If you desire that any records be certified, you must specify which ones.
- E. To reimburse us our actual costs for reproducing and certifying (if requested) the records, you will be charged the following fees:
 - There is a \$1.00 charge for each certification of records.
 - There is no charge for the first fifty (50) pages of black and white text either letter or legal size.
 - There is a \$.10 per page charge for copied records in excess of 50 pages.
- F. If the records are kept in electronic format, you may request a specific format and if feasible, they will be so provided, but if not, they will be provided either in the electronic format in

which they are kept (and you would be required to pay the actual cost of the medium only, i.e. disc, diskette, tape, etc.) or in paper as you select.

G. The office will respond to a written request within five (5) working days or sooner if possible.

An extension of an additional five (5) working days may be necessary to properly respond.

H. Records may be inspected or copied. If inspected, an employee must be present throughout the inspection.

I. The place and times where the records will be available are as follows:

During school year: Monday-Thursday 8:00 a.m. to 8:00 p.m., Friday 8:00 a.m. to 4:00 p.m.

During summer break: Tuesday-Wednesday 9:00a.m. to 5:00 p.m., Thursday 9:00 a.m. to 8:00 p.m., Friday 9:00 a.m. to 2:00 p.m.

III. Certain types of information maintained by us are exempt from inspection and copying. However, the following types or categories of records are maintained under our control:

- A. Monthly Financial Statements
- B. Annual Receipts and Disbursements Reports
- C. Budget and Appropriation Ordinances
- D. Levy Ordinances
- E. Operating Budgets
- F. Annual Audits
- G. Minutes of the Board of Library Trustees
- H. Library Policies
- I. Adopted Ordinances and Resolutions of the Board
- J. Annual Reports to the Illinois State Library

Central Citizens' Library District Freedom of Information Request Form

Requestor's Name (or Business name, if applicable)

Date of Request: _____ Phone Number: _____

Address: _____

Certification requested: Yes ___ No ___ Description of Records Requested:

Is the reason for this request a "commercial purpose" as defined in the Act? Yes ___ No ___

Library Response (Requestor does not fill in below this line)

Approved	<input type="checkbox"/> The Documents requested are enclosed <input type="checkbox"/> You may inspect the records at _____ on the date of _____. <input type="checkbox"/> The Documents will be made available upon payment of copying costs of \$_____. <input type="checkbox"/> For "Commercial requests" only: the estimated time of when the documents will be available is _____, at the prepaid costs stated above.
Denied	<input type="checkbox"/> The Request creates an undue burden on the public body in accordance with Section 3(g) of the Freedom of Information Act, and we are unable to negotiate a more reasonable request. <input type="checkbox"/> The Materials requested are exempt under Section 7 _____ of the Freedom of Information Act for the following reasons: _____ _____ Individual(s) that determined request to be denied and title: _____ In the event of denial, you have the right to seek review by the Public Access Counselor at (217)558-0486 or 500 S. Second St. Springfield, IL 62705 Or you have the right to Judicial review under section 11 of FOIA. <input type="checkbox"/> Request delayed, for the following reasons (in accordance with 3(e) of the FOIA): _____. You will be notified by the date of _____ as to the action taken on your request.

Note: This form cannot be MANDATORY under FOIA, but it is preferred. Failure to use it may result in the request not being properly or promptly processed.

FOIA Officer: _____ Date of Reply: _____