

COOK COUNTY RECORDER OF DEEDS

EMPLOYMENT PLAN, SECTION IV, N & M RECORDER'S REPORT REQUEST FORM

PLEASE LEGIBLY PRINT THE BELOW INFORMATION, AND RETURN TO THE DESIGNATED ADDRESS(ES)

REQUESTER'S INFORMATION

NAME OF REQUESTER

DATE OF REQUEST

ADDRESS OF REQUESTER (INCLUDING CITY, STATE & ZIP CODE PLEASE)

REQUESTER'S EMAIL ADDRESS

REQUESTER PHONE NUMBER (IF ?'S ARISE)

PREFERRED DELIVERY METHOD

THIS FORM NEED ONLY BE COMPLETED & SUBMITTED IF YOU (THE REQUESTER) CHOOSE TO SUBMIT THIS REQUEST TO OUR DIRECTOR OF COMPLIANCE VIA MAIL OR IN PERSON. YOU MAY ALSO SUBMIT A REQUEST FOR A SECTION IV, N & M, RECORDER'S REPORT IN RESPONSE TO CERTAIN FINDINGS OR RECOMMENDATIONS VIA EMAIL BY SENDING AN EMAIL TO THE DIRECTOR OF COMPLIANCE, THOMAS MCMAHON AT THOMAS.MCMAHON@COOKCOUNTYIL.GOV WITH "SECTION IV REPORTS REQUEST" IN SUBJECT LINE, WITH YOUR RETURN CONTACT INFORMATION IN THE BODY OF THE EMAIL. ACCORDINGLY, PLEASE INDICATE BELOW HOW YOU WOULD LIKE YOUR REQUEST FULFILLED.

MAIL

SEND TO: 118 N. CLARK ST., RM. 230, CHI., IL 60602
(ATTENTION: DIRECTOR OF COMPLIANCE)

IN-PERSON

VISIT: 118 N. CLARK ST., RM. 230, CHI., IL 60602
(ATTENTION: DIRECTOR OF COMPLIANCE)

EMAIL

SEND TO:
THOMAS.MCMAHON@COOKCOUNTYIL.GOV

SUPPLEMENTARY INFO

PLEASE INCLUDE ANY CASE NUMBERS OR SPECIFIC INFORMATION TO IDENTIFY THE REPORT YOU ARE REQUESTING, AS WELL AS ANY SUPPLEMENTARY INFORMATION YOU THINK WILL ASSIST.

CASE NUMBER

CASE NUMBER

PLEASE INCLUDE ANY ADDITIONAL INFORMATION AS NECESSARY ABOVE

AUTHORIZATION

BY SIGNING AND DATING BELOW, I DO HEREBY AUTHORIZE THE COOK COUNTY RECORDER OF DEEDS & ITS DIRECTOR OF COMPLIANCE TO PERFORM AND FULFILL THE ABOVE REFERENCED SEARCH REQUEST. FURTHERMORE, I ALSO ACKNOWLEDGE MY UNDERSTANDING THAT THIS IS NOT A FOIA REQUEST, AND SHOULD I WANT TO SUBMIT SUCH A REQUEST, I SHOULD DO SO VIA THE CCRD WEBSITE BY VISITING THE "FORMS" PAGE. FINALLY, MY SIGNATURE BELOW ALSO INDICATES MY UNDERSTANDING THAT THE DISSEMINATION OR DELIVERY OF THE REPORTS WILL BE HANDLED IN ACCORDANCE WITH THE APPLICABLE SECTIONS ABOVE, AND AS OUTLINED IN THE CCRD EMPLOYMENT PLAN.

REQUESTER'S SIGNATURE

DATE