

**To:** David Guritz, Director  
**From:** Rebecca Antrim, Administrative Assistant  
**Subject:** Special Use Permit Requests – University of Illinois Extension (4H)  
**Date:** September 27, 2019

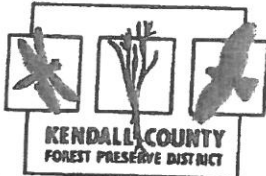
Here are the Special Permit Requests received from the University of Illinois – 4H – Kim Eisnaugle and fees that were waived for Fiscal Year 2019 and tentative dates received for Fiscal Year 2020. For the TBD events, the request was received, but dates have not been communicated yet.

**2019 University of Illinois Extension – 4H – Kim Eisnaugle**

4-H Rockin KC Monthly Meetings			
	Historic Courthouse	Jan – April & Sept – Dec	\$ 360.00
	Harris Forest Preserve	May thru August	\$ 200.00
4H Outdoor Skills Workshop	Hoover Forest Preserve	April 24, 2019	\$ 170.00
4H Outdoor Skills - Overnight	Hoover Forest Preserve	May 18-19, 2019	\$ 170.00
4H Twilight Camp	Harris Forest Preserve (every Wednesday)	June 2019	\$ 200.00
4H Gaming Show (2 days)	Harris Forest Preserve	July 10 & 11, 2019	\$ 200.00
4H English-Pleasure Show	Harris Forest Preserve	July 13, 2019	\$ 100.00
4H Western Pleasure Show	Harris Forest Preserve	July 14, 2019	\$ 100.00
4H Western Show (re-scheduled)	Harris Forest Preserve	July 20, 2019	\$ 100.00
<b>TOTAL – University of Illinois Extension</b>			<b><u>\$1,600.00</u></b>

**2020 University of Illinois Extension – 4H – Kim Eisnaugle**

4-H Rockin KC Monthly Meetings	Historic Courthouse	Jan – May & Sept – Dec	\$ 360.00
	Harris Forest Preserve	June thru August	\$ 150.00
4H Gaming Show (2 days)	Harris Forest Preserve (rain date July 9, 2020)	July 8, 2020	\$ 200.00
4H Pleasure Show	Harris Forest Preserve	July 11, 2020	\$ 100.00
4H Western Show	Harris Forest Preserve	July 12, 2020	\$ 100.00
4H Twilight Camp	Harris Forest Preserve (every Wednesday)	TBD	\$ 200.00
4H Outdoor Skills Workshop	Hoover Forest Preserve	TBD	\$ 170.00
4H Outdoor Skills - Overnight	Hoover Forest Preserve	TBD	\$ 170.00
4H Owl Box Project	TBD	TBD	TBD
<b>TOTAL – University of Illinois Extension</b>			<b><u>\$1,450.00*</u></b> <b><i>tentative</i></b>



110 W. Madison St., Yorkville, IL 60560 Ph: 630-553-4025 Fax: 630-553-4023

**Facility Rental Contract**

Permit #: 19-00246  
 Contract Date: 09/25/2019  
 Use Type: Department Meeting  
 Description: Lodge  
 Registrar: Rebecca Antrim  
 Phone: (630) 553-4108  
 Email: rmickelson@co.kendall.il.us

**Customer**  
 KC County Clerk  
 Renetta Mickelson  
 111 W. Fox Street, Room 220  
 Yorkville, IL 60560

**Rental Information**

**Location:** Meadowhawk Lodge @ Hoover Forest Preserve  
 11285 Fox Road  
 Yorkville, IL 60560

**Total Hours:** 7.00

Date	Day	Time	Description	Qty	Unit	Rate	Total	Tax
11/6/2019	Wed	8:00 AM - 3:00 PM	Meadowhawk Lodge - Hourly - Weekday Hourly (Head Count: 20)	7.00	Hours	\$60.00	\$420.00	\$0.00

No glass bottles allowed.  
 KC County Clerk - Tax Extenders Regional Meeting  
 20 people  
 Refrigerator Use  
 Caterer: Upper Crust  
 Board approval needed to waive fee

**Billing/Payment Summary**

Invoice#	Due Date	Total	Amount Paid	Balance Due
Sec Deposit	09/25/2019	\$210.00	\$0.00	\$210.00
2008	10/04/2019	\$420.00	\$0.00	\$420.00
<b>Total</b>		<b>\$630.00</b>	<b>\$0.00</b>	<b>\$630.00</b>

Total Hours	7.00
Total Fees	\$420.00
Total Sec Dep	\$210.00
Total Tax	\$0.00
<b>Rental Total</b>	<b>\$630.00</b>

**Rental Terms and Conditions**

Permittee has read, signed and agrees to all enclosed documentation. The undersigned, their organization and its members (the Permittee), in consideration for the use of the above described facilities, agree to hold Owner harmless from all loss and/or damage resulting from the use of the facility. Security Deposit, where applicable, is due at time reservation is made. Full Rental Fee is due 60 calendar days prior to event date.

Signature: *Renetta Mickelson, Chief Deputy*

Date: *9/26/2019*

*Kendall Co Clerk's Office*

**Kendall County Forest Preserve**

110 W. Madison Street  
 Yorkville IL 60560  
 630-553-4025

**Permit: 85010****Date:** 9/30/19**Page:** 1 of 2**Event:** KCSO-Stef 4-25**Expected Attendance:** 25

**To:** Stefaniak, Marcy - KC Special Olymp  
 2420 Rock Creek Road  
 Plano IL 60545

**Contact Person****Home Phone:** c 630-552-3826**Work Phone:** c 630-291-6381

<b>Facility Charges</b>		<b>Hours/Qty</b>	<b>Rate</b>	<b>Cost</b>
<b>Harris FP - Shelter 4</b>				
Sat Oct 19, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Oct 26, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Nov 2, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Nov 9, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Nov 16, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Nov 23, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Nov 30, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Dec 7, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Dec 14, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Dec 21, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Dec 28, 2019	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Jan 4, 2020	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Jan 11, 2020	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Jan 18, 2020	9:00AM - 10:00AM	1.00	50.00	50.00
Sat Jan 25, 2020	9:00AM - 10:00AM	1.00	50.00	50.00

<b>Total Permit Cost</b>	<b>750.00</b>
<b>Amount Paid</b>	<b>0.00</b>
<b>Balance Due</b>	<b>750.00</b>



## Kendall County Forest Preserve District SHELTER & COURTHOUSE RENTAL REQUEST FORM

**Office Use Only**  
 Permit # \_\_\_\_\_  
 Date Submitted 9-16-19  
 Issue Date \_\_\_\_\_

**Instructions**

- This form is to be completed in its entirety and can be faxed to 630-553-4023 or sent by e-mail to: [rantrim@co.kendall.il.us](mailto:rantrim@co.kendall.il.us). Rental requests are required two (2) weeks in advance of requested event date.
- The Rental Request will be entered into our reservation calendar and copy of the permit is scanned to your e-mail for signature.
- **Receipt of the signed permit is required at the time you receive the permit for the reservation to be considered secure.**
- **The Full Rental Fee is required 60 calendar days prior to your event date.**
- **Courthouse Rentals require a \$100.00 security deposit at the time of the request in order to secure this reservation.**

**Permittee Information** *(Permittee must be 21 or older and attend the event)*

Name Kendall County Special Olympics - marcy stefaniak  
 Street Address 2420 Rock Creek Rd  
 City Plano State IL Zip \_\_\_\_\_ Kendall Resident? Yes  No   
 Phone # (two numbers are required) Cell: 630-552-3826 Other: 630-291-6381  
 E-mail: KCSOcomets@gmail.com

**Requested Site**

Harris Forest Preserve: Shelter 1  144 ppl Shelter 2  80 ppl Shelter 4  80 ppl Shelter 7  80 ppl  
 Richard Young:  56 ppl  
 Jay Woods:  80 ppl  
 Historic Courthouse: East Wing Conf. Room  70 ppl Court Room  130 ppl Third Floor Conf. Room  16 ppl

**Requested Date**

Event Date: Saturdays 9-10 AM  
Oct 19 - Jan 25, 2020 Preserves are available at 9:00 am  
 Time Frame: 9-10 AM Gates are closed at sunset; departure time required at least 30 minutes prior  
 Number of People: 20-25 athletes \$25.00 fee applied for 100+ people

**Type of Group:** please circle: Organization Family, Organization, Church, School, Scout, etc.  
*Non-family events require Certificate of Insurance*

**Name of Event** *(Scout troops: please indicate Pack or Troop Number & Council)*

Special Olympics Snow Shoe practice

**Firewood:** Must be purchased from the Forest Preserve. (Collection from grounds or brought from outside is prohibited)

Number of bundles requested: \_\_\_\_\_ Firewood: \$25.00 / bundle



110 W. Madison St., Yorkville, IL 60560 Ph: 630-553-4025 Fax: 630-553-4023

## Facility Rental Contract

Permit #: 19-00194 Page 1 of 2  
 Contract Date: 07/31/2019  
 Use Type: Other  
 Description: Court Room, Conference Rooms  
 Registrar: Rebecca Antrim  
 Phone: (630) 207-2366 / (630) 788-4346  
 Email: lwolancevich@live.com

**Customer**  
**American Assoc. University Wom**  
**Lisa Wolancevich**  
**507 W Madison Street**  
**Yorkville, IL 60560**

### Rental Information

**Location:** Court Room @ Historic Courthouse  
 110 W. Madison Street  
 Yorkville, IL 60560 **Total Hours:** 4.00

Date	Day	Time	Description	Qty	Unit	Rate	Total	Tax
12/8/2019	Sun	2:00 PM - 6:00 PM	Court Room Hourly (Head Count: 80)	4.00	Hours	\$40.00	\$160.00	\$0.00

Yorkville Historic Society Hometown Christmas  
 80 people  
 Security Deposit due: July 31, 2019  
 Full Rental fee due: September 23, 2019  
 Certificate of Insurance required  
 9/26/19 - per Lisa, change date to December 8, 2019

### Rental Information

**Location:** East Wing Conference Room @ Historic Courthouse  
 110 W. Madison Street  
 Yorkville, IL 60560 **Total Hours:** 4.00

Date	Day	Time	Description	Qty	Unit	Rate	Total	Tax
12/8/2019	Sun	2:00 PM - 6:00 PM	Conference Room Hourly (Head Count: 80)	4.00	Hours	\$20.00	\$80.00	\$0.00

Yorkville Historic Society - Hometown Christmas  
 80 people  
 Security Deposit due: July 31, 2019  
 Full Rental fee due: September 23, 2019  
 Certificate of Insurance required  
 9/26/19 - Per Lisa, change date to December 8, 2019

### Rental Information

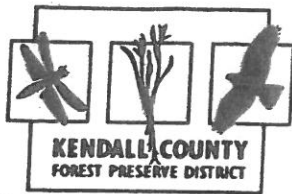
**Location:** Third Floor Conference Room @ Historic Courthouse  
 110 W. Madison Street  
 Yorkville, IL 60560 **Total Hours:** 4.00

Date	Day	Time	Description	Qty	Unit	Rate	Total	Tax
12/8/2019	Sun	2:00 PM - 6:00 PM	Conference Room Hourly (Head Count: 80)	4.00	Hours	\$20.00	\$80.00	\$0.00

Yorkville Historic Society Hometown Christmas  
 80 people  
 Full Rental fee due: September 23, 2019  
 Certificate of Insurance required  
 9/26/19 - per Lisa, change date to December 8, 2019

### Billing/Payment Summary

Invoice#	Due Date	Total	Amount Paid	Balance Due
Sec Deposit	07/31/2019	\$200.00	\$0.00	\$200.00
1963	09/23/2019	\$320.00	\$0.00	\$320.00



110 W. Madison St., Yorkville, IL 60560 Ph: 630-553-4025 Fax: 630-553-4023

## Facility Rental Contract

Page 1 of 2

**Permit #:** 19-00219  
**Contract Date:** 08/23/2019  
**Use Type:** 4H Program  
**Description:** Conference Room  
**Registrar:** Rebecca Antrim  
**Phone:** (630) 553-5823  
**Email:**

**Customer**  
**Kim Eisnaugle**  
**7775 B State Route 47**  
**Yorkville, IL 60560**

### Rental Information

**Location:** East Wing Conference Room @ Historic Courthouse  
 110 W. Madison Street  
 Yorkville, IL 60560

**Total Hours:** 16.00

Date	Day	Time	Description	Qty	Unit	Rate	Total	Tax
1/7/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00
2/4/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00
4/7/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00
5/5/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00
9/1/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00
10/6/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00
11/3/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00
12/1/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00

Rockin' KC 4H Monthly Meeting  
 25 people  
 Board approval needed to waive fee

### Rental Information

**Location:** Third Floor Conference Room @ Historic Courthouse  
 110 W. Madison Street  
 Yorkville, IL 60560

**Total Hours:** 2.00

Date	Day	Time	Description	Qty	Unit	Rate	Total	Tax
3/3/2020	Tue	6:30 PM - 8:30 PM	Conference Room Hourly (Head Count: 25)	2.00	Hours	\$20.00	\$40.00	\$0.00

Rockin' KC Monthly Meeting  
 25 people  
 Board approval needed to waive fee

### Billing/Payment Summary

Invoice#	Due Date	Total	Amount Paid	Balance Due
Sec Deposit	08/23/2019	\$100.00	\$0.00	\$100.00
<b>Total</b>		<b>\$100.00</b>	<b>\$0.00</b>	<b>\$100.00</b>

Total Hours	18.00
Total Fees	\$360.00
Total Sec Dep	\$100.00
Total Tax	\$0.00
<b>Rental Total</b>	<b>\$460.00</b>

### Rental Terms and Conditions

Permittee has read, signed and agrees to all enclosed documentation. The undersigned, their organization and its members (the Permittee), in consideration for the use





110 W. Madison St., Yorkville, IL 60560 Ph: 630-553-4025 Fax: 630-553-4023

## Facility Rental Contract

Page 1 of 1

**Permit #:** 19-00248  
**Contract Date:** 09/27/2019  
**Use Type:** 4H Program  
**Description:** Shelter, Horse Arena  
**Registrar:** Rebecca Antrim  
**Phone:** (630) 553-5823  
**Email:**

**Customer** **Kim Eisnaugle**  
**7775 B State Route 47**  
**Yorkville, IL 60560**

### Rental Information

**Location:** Shelter 7 @ Harris Forest Preserve  
 10460 Route 71  
 Yorkville, IL 60560

**Total Hours:** 6.00

Date	Day	Time	Description	Qty	Unit	Rate	Total	Tax
6/2/2020	Tue	5:30 PM - 7:30 PM	Shelter Flat (Head Count: 25)	1.00	Each	\$50.00	\$50.00	\$0.00
7/7/2020	Tue	5:30 PM - 7:30 PM	Shelter Flat (Head Count: 25)	1.00	Each	\$50.00	\$50.00	\$0.00
8/4/2020	Tue	5:30 PM - 7:30 PM	Shelter Flat (Head Count: 25)	1.00	Each	\$50.00	\$50.00	\$0.00

No alcohol allowed.  
 4H Rockin KC Monthly Meetings  
 25 people  
 Board approval needed to waive fees

<b>Total Hours</b>	<b>6.00</b>
<b>Total Fees</b>	<b>\$150.00</b>
<b>Total Sec Dep</b>	<b>\$0.00</b>
<b>Total Tax</b>	<b>\$0.00</b>
<b>Rental Total</b>	<b>\$150.00</b>

### Rental Terms and Conditions

Permittee has read, signed and agrees to all enclosed documentation. The undersigned, their organization and its members (the Permittee), in consideration for the use of the above described facilities, agree to hold Owner harmless from all loss and/or damage resulting from the use of the facility. Security Deposit, where applicable, is due at time reservation is made. Full Rental Fee is due 60 calendar days prior to event date.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_





STATE OF ILLINOIS  
INTER AGENCY USER AGREEMENT BETWEEN  
THE ILLINOIS STATE POLICE AND  
REQUESTING GOVERNMENT AGENCY

The Illinois State Police (hereinafter called "ISP"), acting as the state central repository for criminal history record information (hereinafter "CHRI"), and

*Requesting Government Agency* Kendall County Forest Preserve District

*ORI Number (if known)* MS 110 6558

*Cost Center (if known)* 5718

Requesting Agency (hereinafter "Requester") hereby agrees to the following terms, provisions, and conditions:

**I. PURPOSE**

ISP, in its capacity as the state central repository, has the authority to provide CHRI, pursuant to the applicable Illinois Compiled Statutes, and be paid for its expenses. This Inter Agency Agreement (hereinafter "Agreement") establishes the terms of the relationship.

**II. TERM**

This agreement will commence upon execution of the signature of the Director of the ISP and continues unless canceled by either party upon 30 days written notice. This agreement may be terminated immediately by the ISP if, in the determination by the ISP, the Requester is in violation of one or more of the enumerated Duties of Requester as outlined in Section IV.

**III. SERVICES ISP AGREES TO PROVIDE REQUESTER**

ISP agrees to provide fingerprint-based CHRI authorized by law and ISP policy requirements. The ISP will charge the requester a fee for this service. The ISP's current fee schedule is posted on the Illinois State Police web page.

**IV. DUTIES OF REQUESTER**

Requester agrees to undertake and perform the following duties:

1. Requester will request applicants submit fee applicant fingerprint cards, via a live scan vendor, for processing by ISP through its files. Manual fee applicant cards (IL 493-0696) will be accepted in those instances where live scan transmissions cannot be used.

2. Requester shall submit FBI fee applicant fingerprint transactions for submission to the Federal Bureau of Identification's Criminal Justice Information Services (CJIS) Division through the ISP.
3. Requester agrees to capture and transmit all fingerprint images to the ISP using live scan equipment certified by the Federal Bureau of Investigation (FBI) and the ISP. The fingerprint images and demographic data must be submitted in the form and manner required by ISP/FBI, including the electronic transfer of fingerprint, photograph and demographic data to the ISP NATMS/AFIS system via a network connection as defined by the ISP/FBI. All fingerprint and demographic data transmitted must be encrypted at all times using FBI encryption standards.
4. The Requester shall be responsible for checking the quality and completeness of all data to ensure conformity to ISP processing requirements. Submissions deemed to be incomplete may be returned unprocessed.
5. The Requester agrees to comply with all ISP/FBI certification standards and procedures, which includes but is not limited to certification of live scan equipment, audits of live scan transmissions to the ISP/FBI and completion of CJIS Security Training. CJIS Security Training is offered on-line at [www.cjisonline.com](http://www.cjisonline.com).
6. The Requester agrees to take appropriate action to ensure each live scan transmission is sent to ISP successfully and passes all ISP live scan edits, conforming to the most recent ISP Electronic Fingerprint Submission Specifications (EFSS). In the event the electronic fingerprint specifications are modified, the requester agrees to make any changes necessary to meet the new specifications within thirty (30) days of notification.
7. The Requester shall comply with all provisions of the UCIA statute (20 ILCS 2635, et seq.) and all other applicable state and federal statutory requirements including all applicable CJIS requirements. The CJIS Security Policy can be accessed on-line as: <https://www.fbi.gov/about-us/cjis/cjis-security-policy-resource-center>.
8. The Requester will provide employee identifiers sufficient to enroll all employees that will come into direct or indirect contact with CHRI into the CJIS Security training. All training will be completed within 6 months of execution of this agreement.
9. The Requester will require all outsourced services and contractual agency(s) with direct or indirect access to CHRI to enter into an Outsourcing Agreement as required by the CJIS Security Policy. See Addendums B and C.
10. The Requester shall receive responses electronically from the ISP, specifically via email, fax or the Criminal History Information Response Process (CHIRP) secure web portal, which can be accessed at <https://chirp.isp.state.il.us/CHIRP/login.action>.

11. The Requester shall maintain a release signed by the individual to whom the information request pertains authorizing the ISP and the FBI to release criminal history record information. The Requester shall maintain this release on file for at least three (3) years in order to facilitate auditing purposes.
12. The Requester shall provide the individual named in the request a copy of the Illinois response disseminated by ISP with instructions on challenging CHRI. The Requester shall notify the individual named in the request that the individual has the obligation and responsibility to notify the Requester within seven (7) days if the information is inaccurate or incomplete. The requirements of this paragraph pertain to requests submitted for employment or licensing purposes only. Information on challenging a criminal history record can be accessed on-line at the ISP website.
13. The Requester shall provide, upon request of the individual named in the request, a copy of the federal response disseminated with instruction on challenging CHRI. The Requester shall notify the individual named in the request that the individual has the obligation and responsibility to notify the Requester within seven (7) days if the information is inaccurate or incomplete. Information on challenging a criminal history record can be accessed on-line at the ISP website.
14. The Requester shall cooperate with and make its records available to ISP/FBI for the purpose of conducting periodic audits to ensure Requestor's compliance with all laws, rules, and regulations regarding the processing of CHRI furnished by ISP/FBI to Requester.
15. When CHRI is no longer required by the Requester, data shall be destroyed by Requester through shredding or burning of paper documentation and/or deletion of electronic CHRI from Requester's databases.
16. The Requester shall pay ISP sufficient funds to cover ISP transaction processing using established payment methods, within 45 days from date of fiscal statement. Failure to pay could result in an interruption or cancellation of services rendered by ISP. The Illinois State Police reserves the right to forward matters of unpaid fees to a private agency or law firm for immediate collection action. Payment for criminal history record information request processing shall be made via an Illinois licensed live scan fingerprint vendor agency or via check made payable to the Illinois State Police, mailed to the Illinois State Police Bureau of Identification, Fiscal Unit, 260 North Chicago Street, Joliet, IL 60432-4072.
17. The Requester shall report to the ISP any changes in agency contact information, and initiate a new user agreement for any change in the agency's Chief Administrator(s). See Addendum A.
18. The Requester shall notify the ISP in the event of Requesting Agency ownership transfer. The Requester is responsible for any outstanding balance due to the ISP prior to any transfer of ownership unless the ISP expressly approves a proposed assumption of outstanding fees owed to the ISP for services provided.
19. Requester will provide a current W9 form to be submitted with signed User Agreement to facilitate processing of refunds.

## V. DISSEMINATION

The Requester shall limit dissemination of CHRI to statutorily authorized parties and ensure such authorized parties agree to provide the same protection and physical security of CHRI as agreed to by Requester.

At a minimum, Requester shall log all dissemination of ISP/FBI CHRI received from ISP and/or the FBI. This log must include the identities of persons or agencies to whom the information is released, the name of the requester, the authority of the requester, the purpose of the request, the identity of the individual to whom the information relates, and the date of the dissemination. Such log shall be retained for a period of three (3) years in order to facilitate any ISP or FBI audit. CHRI will only be disseminated directly to the Requester and only to the extent permitted by law.

Pursuant to 20 ILCS 2635/18, any person who intentionally and knowingly requests, obtains or seeks to obtain conviction information under false pretenses, disseminates inaccuracies or incomplete conviction information, or violates any other provision of 20 ILCS 2635 et seq. may be guilty of a crime punishable by up to one year of imprisonment and/or may incur civil liabilities.

Pursuant to federal 28 CFR 50.12(b) records obtained under this authority may be used solely for the purpose requested and cannot be disseminated outside the receiving departments, related agencies or other authorized entities.

## VI. DUTIES OF ISP

ISP agrees to undertake and perform the following duties:

1. ISP will only process requests submitted in the form and manner prescribed by the ISP.
2. ISP agrees to forward, in a timely fashion, FBI applicant fingerprint transactions to the FBI's Criminal Justice Information Services (CJIS) Division.
3. ISP shall, if requested, assist in the interpretation or translation of any CHRI requiring clarification.
4. ISP fees shall be based upon the cost of providing CHRI services, as required by law. The ISP shall notify the Requester of any change in processing fees.
5. Fingerprint submission procedures established by the FBI are subject to change and ISP shall advise Requester immediately of any changes promulgated by the FBI.

**VII. GENERAL PROVISIONS**

1. ISP agrees to notify Requester at least thirty (30) days prior to making changes in rules, procedures, and policies incorporated in this agreement. Changes in the rules, procedures, and policies originating with federal and state executive order, Congressional or State legislative enactment or by court decision shall be initiated as required by law.
2. This agreement may be amended with the mutual consent of both parties at any time during its term. Amendments to this agreement shall be in writing and signed by both parties or their authorized representatives.
3. Correspondence shall be directed to:

Illinois State Police  
Bureau of Identification  
260 North Chicago Street  
Joliet, Illinois 60432-4075  
boi\_customer\_support@isp.state.il.us

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*Signature of Agency Head*

---

*Date*

---

*Signature Director*  
*Illinois State Police*

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*Date*

**ADDENDUM A**  
**INTER AGENCY USER AGREEMENT**  
*Agency Contact Sheet (Sections in Grey for Illinois State Police Use Only)*

<b>Agency Originating Identification (ORI)</b>	MS 1106558
<b>Agency Cost Center</b>	5718
<b>Purpose Code(s) for Agency Use</b>	MISC

**Complete this entire section.**

<b>Point of Contact for Responses</b>	Rebecca Antrim
<b>Agency Name</b>	Kendall County Forest Preserve District
<b>BILLING ADDRESS</b>	
<b>Street Address</b>	110 W. Madison Street
<b>City, State, Zip</b>	Yorkville, IL 60560
<b>Telephone Number</b>	630-553-4025
<b>Fax Number</b>	630-553-4023
<b>Email Address</b>	kcforest@co.kendall.il.us

**MAILING ADDRESS**

Same as Billing Address

<b>Point of Contact Billing Questions</b>	Rebecca Antrim
<b>Street Address</b>	110 W. Madison Street
<b>City, State, Zip</b>	Yorkville, IL 60560
<b>Telephone Number</b>	630-553-4025
<b>Fax Number</b>	630-553-4023
<b>Email Address</b>	kcforest@co.kendall.il.us