

ELWOOD FIRE PROTECTION DISTRICT

309 West Mississippi Street Elwood, Illinois 60421-9211 (815) 423-5224

ESTABLISHED 1965

FORM 1

ELWOOD FIRE PROTECTION DISTRICT FREEDOM OF INFORMATION ACT WRITTEN REQUEST FOR RECORDS

Dear Fire Ch	ief (or designee):	
(I), (\	We), are hereby requesting that (I) (V	Ve)
	_ inspect the following records at t	he Elwood Fire Protection District's Administrative Office.
	receive copies of the following receive be specific in listing rec	ecords from the Elwood Fire Protection District. ords.)
	Please email the reques	ted records to:
	Please mail the requested records to:	
	rds received or requested, or the info or advertisement for sales or servic	ormation derived thereof be used in any form of sale, resale, es?
	Yes	No
	that if I request that the records be end requests to admin@elwoodfpd.c	copied, I may be charged a fee due in full before the copies om.
Signature(s)	of Requester(s)	_
Date of Requ	uest	_
Date Reques	et Received:	Signature:
Date Respon	nse Due:	_