EAST DUNDEE FIRE PROTECTION DISTRICT RECORD REQUEST FORM ILLINOIS FREEDOM OF INFORMATION ACT

I submit this request for records from The East Dundee Fire Protection District under the provisions of the Illinois Freedom of Information Act.

				,
Requestor Name:				
Current Mailing Address:				
Daytime Telephone:				
Request Submitted By:	[] E-mail [] U.S. Mail [] Fax [] In Person	
	a description of the reco		possible, for example, title or subject person or office receiving the document or	
Type of Request: This request is to:	[] Inspect the recording [] Obtain a copy of [] Election [] Obtain a certified	the record(s) ctronic Copies?	What Format?	
	om of Information Act for a p		[] No obtain a public record for a commercial perpublic body. (5 ILCS 140.3.1 (c))	ourpose
	public body waive any fees fo cipla purpose of the request i	r copying documents is to access or disse	, you must attach a statement of the purposi minate information regarding the health, saf	
Signature of Requestor			Date	
	Offic	ce Use Only:		
Request Received By:				
Request Received:	Date:		Time:	