

**MINOOKA FIRE PROTECTION DISTRICT**

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**FORM 1**

**MINOOKA FIRE PROTECTION DISTRICT  
FREEDOM OF INFORMATION ACT  
WRITTEN REQUEST FOR RECORDS**

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Dear Fire Chief (or designee):

(I), (We), are hereby requesting that (I) (We)

\_\_\_\_\_ inspect the following records at the Minooka Fire Protection District Administrative Office.

\_\_\_\_\_ receive copies of the following records from the Minooka Fire Protection District.

\_\_\_\_\_ the records received or requested or the information derived thereof may be used in any form of sale, resale, or solicitation or advertisement for sales or services

(Please be specific in listing records.)

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I understand that if I request that the records be copied, I may be charged a fee due in full before the copies are made.

\_\_\_\_\_  
Signature(s) of Requester(s)

\_\_\_\_\_  
Date of Request

**(For office use only)**

Date Request Received \_\_\_\_\_

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

Date Response Due \_\_\_\_\_

## FORM 2

**MINOOKA FIRE PROTECTION DISTRICT  
FREEDOM OF INFORMATION ACT  
APPROVAL FOR REQUEST FOR PUBLIC RECORDS**

DATE: \_\_\_\_\_

TO: \_\_\_\_\_

FROM: \_\_\_\_\_

Minooka Fire Protection District

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_

PHONE NUMBER

DESCRIPTION OF REQUESTED RECORDS:

Your request dated \_\_\_\_\_ for the above captioned records has been approved.

The documents will be made available at the District Administrative Office on (Date) \_\_\_\_\_  
\_\_\_\_\_ upon payment of copying costs in the amount of \_\_\_\_\_  
\_\_\_\_\_.

You may inspect the records at \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_on \_\_\_\_\_  
DATE\_\_\_\_\_  
Fire Chief or Designee\_\_\_\_\_  
Date