FORM 1

WONDER LAKE FIRE PROTECTION DISTRICT FREEDOM OF INFORMATION ACT WRITTEN REQUEST FOR RECORDS

Dear Freedom of Inform	ation Officer (or designee):		
(I), (We), are he	ereby requesting that (I) (V	Ve)		
	inspect the following Administrative Office.	records at the	Nonder Lake Fire	Protection District's
	receive copies of the f District.	ollowing records	from the Wonder	Lake Fire Protection
(Please be spec	cific in listing records.)			
	s received or requested or solicitation or advertiseme			used in any form of
Yes		_ No		
I understand that if I req are made.	uest that the records be o	copied, I may be c	harged a fee due in	full before the copies
Signature(s) of Requester(s)		Address		
Date of Request		Telepho	ne Number	
		Email Ac	Idress	
	(FOR INTE	RNAL USE ONL	.Y)	
Date Request Received:		<u> </u>	Signature:	
Date Response Due:				