



REQUEST FOR DOCUMENTS

DATE: _____

NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL: _____

PREFERRED METHOD OF DELIVERY:

- MAIL EMAIL

REQUESTED GENERAL SUPERINTENDENT REPORT TO:

- INCIDENT REPORT OF DIRECTOR OF COMPLIANCE
 SUMMARY REPORT OF OFFICE OF INDEPENDENT INSPECTOR GENERAL

REPORT NUMBER: _____

Please use this form to request the General Superintendent Report and accompanying Summary Report of the Office of Independent Inspector General or Incident Report of the Director of Compliance. Use a separate form for each requested Report.

You must fill this form out completely and submit it in one of the following ways:

In person or via U.S. Mail:

Director of Compliance
Forest Preserve District of Cook County
69 W. Washington, Ste. 2010
Chicago IL 60602

This request will be fulfilled within 30 days.