

BYRON FIRE PROTECTION DISTRICT
AFFIDAVIT OF RELATIONSHIP

STATE OF ILLINOIS)
) SS
COUNTY OF)

I, _____, on oath state:

1. _____ (insert name of person) is the subject of an emergency services record(s) prepared and kept by THE BYRON FIRE PROTECTION DISTRICT.

2. _____ (insert name of person) is unable to lawfully execute a release for these records because: (explain reason - for example, minor, incapacitated, death)

3. My relationship to _____ (insert name to person or property) is as follows: (explain relationship - for example, attorney-in-fact, executor or beneficiary of estate, parent, legal guardian, etc.)

4. Attached are copies of any documents evidencing this relationship (list documents; if none, please write "not available" or "not applicable"):

FURTHER SAYETH AFFIANT NOT.

(Signature)

(Print Name)

SUBSCRIBED and SWORN TO
before me this _____ day of _____,
_____, 20__.

Notary Public