



St. Joseph County Health Department

"Promoting physical and mental health and facilitating the prevention of disease, injury, and disability for all St. Joseph County residents"

Request for Information

Person Requesting Information: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alt Phone: _____

Fax: _____ E-Mail: _____

Information Requested: _____

| | | | |
|--|-------|-----------------------|-------|
| FOR OFFICE USE ONLY! | | | |
| Date of Request: | _____ | Dated Request Filled: | _____ |
| Number of Pages: | _____ | Initials of Staff: | _____ |
| Payment Information (If Applicable) | | | |
| Invoice No.: | _____ | Amount Paid: | _____ |
| Date of Invoice: | _____ | Date Paid: | _____ |
| Transaction #: | _____ | Initials of Staff: | _____ |

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227 West Jefferson Blvd.
South Bend, IN 46601
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