

# TOLLESHUNT D'ARCY PARISH COUNCIL

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## FREEDOM OF INFORMATION ACT Request for Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Tel No: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Details of information requested:

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Signed: \_\_\_\_\_ Date: \_\_\_\_\_