

FORM ONE

After carefully reading the booklet “Protect Your Family From Lead in Your Home,” **sign and detach this Receipt and return it to the City of Lakewood, Division of Community Development Office, 12650 Detroit Avenue.**

RECEIPT OF BOOKLET

I have received a copy of the booklet entitled:

PROTECT YOUR FAMILY FROM LEAD
IN YOUR HOME
June 2003

Print Full Name <hr/>
Signature <hr/>
Address and Apt. # <hr/>
Date: <hr/>