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Fire Report

1. Number _____
2. Number _____
3. Name Of A Town _____
4. Location _____
5. Noun _____
6. Number _____
7. Location _____
8. Name Of A Town _____
9. Noun _____
10. Noun _____
11. Noun _____
12. Number _____
13. Number _____
14. Noun _____
15. Number _____
16. Noun _____
17. Noun _____
18. Number _____
19. Noun _____
20. Adjective _____
21. Number _____
22. Number _____
23. Location _____

24. Name Of A Town _____
25. Name Of A Town _____
26. Name Of A Town _____
27. Name Of A Town _____
28. Adjective _____
29. Name Of A Town _____
30. Name Of A Town _____
31. Name Of A Town _____
32. Noun _____
33. Name Of A Town _____
34. First Name Of A Person _____
35. Number _____
36. Full Name Of A Person _____

Fire Report

At _____Number_____ hours on _____Number_____ September 2017, the _____Name of a Town_____ Fire District was notified by way of a 911 call from _____Location_____ University reporting a _____Noun_____ emergency and was dispatched to _____Number_____ _____Location_____ road in _____Name of a Town_____.

An _____Noun_____ engine company and a medic were dispatched for a _____Noun_____ related emergency. When the _____Noun_____ engine arrived on scene at _____Number_____ hours, there were _____Number_____ people in need of _____Noun_____ attention.

The response was upgraded to include _____Number_____ additional ambulances, another engine company and a _____Noun_____ Chief.

While _____Noun_____ personnel were treating the initial _____Number_____ victims, more victims began to request _____Noun_____, all suffering from _____Adjective_____ related emergencies.

At the conclusion of the incident, a total of _____Number_____ victims were treated, of which _____Number_____ were transported to _____Location_____ Hospital in _____Name of a Town_____.

_____Name of a Town_____ Fire District units were assisted on the scene by the _____Name of a Town_____ Fire District, _____Name of a Town_____ _____Adjective_____ Fire Department and the _____Name of a Town_____ Fire Department. The _____Name of a Town_____ and _____Name of a Town_____ Fire Departments provided _____Noun_____ at _____Name of a Town_____ Fire District stations.

There were no injuries to emergency responders during this incident. No further

information is available at the time. Additional information will be disseminated as it becomes available. If you have further questions, please contact EMS Coordinator _____First Name of a Person_____ Weaver at 630.353.3000.

Issued at _____Number_____ hours by: Battalion Chief _____Full Name of a Person_____ ..

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