

Request for Gaines Township Public Record

Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et. Seq.

To: FOIA Coordinator: I am a person as defined under Michigan FOIA. Please accept this correspondence as a request pursuant to the Michigan Freedom of Information Act (FOIA) Michigan Compiled Laws §15.231 to §15.246 *et seq.*, the Michigan Constitution and common law, and the U.S. Constitution, for certain public documents hereinafter specified.

Date of Request: _____ **Time:** _____ via mail / fax / email /in-person

Person Requesting Record: Please Print Clearly

Name: _____

Phone: _____ Fax: _____

Mailing address _____

Email Address: _____ **Alt phone number** _____

Delivery Specifications: Check your choice

- Mail:** to the address above.
- Email:** to requestor at the email address above if possible.
- In-office Inspection:** Please contact me with an acceptable contact, time, and date when I may appear for inspection and possible scanning of documents.
- Pick- up:** Please contact me with an acceptable contact, time, and date when I may pick up the documents.
- Subscription:** to records issued on a regular basis mailed to the above address.

Records requested: Please be as specific as possible.

The records and documents I am requesting are all those relating to:

Requestor's Signature _____ Date: _____

Gaines Township may charge reasonable fees for copies of documents and for time spent in filling this request under the FOIA. The Township must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-day extension upon notification by the Township.