

FREEDOM OF INFORMATION ACT - REQUEST FOR INFORMATION

(MCLA 115.231 et seq; MSA 4.1801(1), et seq)

I, THE UNDERSIGNED, HEREBY REQUEST A COPY OF THE FOLLOWING NEGAUNEE CITY POLICE RECORDS. THE CHARGE FOR SAID INFORMATION WILL BE CALCULATED ACCORDING TO THE CITY FEE SCHEDULE. IF YOU DO NOT HAVE THE CASE NUMBER(S), PLEASE GIVE A DETAILED DESCRIPTION OF THE RECORD YOU ARE SEEKING INCLUDING DATES AND THE NAMES OF PERSONS INVOLVED. WE ONLY PROVIDE RECORDS THAT SPECIFICALLY FIT THE CRITERIA YOU PROVIDE – BE CLEAR TO ENSURE YOU GET THE DESIRED RECORDS.

DESCRIPTION OF INCIDENTS(S): _____

Name of Requestor (please print)

Address

City/State/Zip

Phone Number

Date

Section 4, of the Act. I hereby agree to pay the charge for the furnishing of this document. I understand that the City may charge me for this pursuant to information in advance of receiving same.

Signature



FOR CITY USE ONLY

OFFICER RECEIVING REQUEST: _____

Date Received: _____

Received by FOIA Coordinator: _____

APPROVED

DENIED

Date Notification Made: _____

MAILED

PHONE

Date Documents Released: _____

Documents: MAILED EMAILED FAXED IN PERSON