LeRoy Township

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FOIA Request for Public Records

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

(Please Print or Type)			
Name:	Pho	one #: (C) (H)	
Firm/Organization:	Fax	: #:	
Street:	Em	ail:	
City:	State:	Zip:	
Request to:Receive copy	Inspect Record	Subscribe to record on regular ba	isis
Delivery Method: (upon payment of	balance due):	Pick up records in person Mail to address above	

Describe the public record(s) as specifically as possible:

Requestor's Signature:	Date:	
Consent to Non-Statutory Exter	nsion of District's Response Time	
I have requested a copy of records or a subscription to record Michigan Freedom of Information Act, Public Act 442 of 1976, respond to this request within five (5) business days after reco business day extension. However, I hereby agree to extend th	MCL 15.231, et seq. I understand that the district must eiving it, and that response may include taking a ten (10)	
Requestor's Signature	Date:	