ROSCOMMON COUNTY
FOIA REQUEST FOR PUBLIC RECORDS
Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, *et seq*

Request No.:_____ Date Received: _____ Received by: _____

Check if received via: ☐ Email ☐ Fax ☐ Other Electronic Method ☐ Mail ☐ In Person

Located in Spam/Junk Mail? ☐ Yes ☐ No Date Discovered: _____

(Please Print or Type)

Name:	Phone:	
Firm/Organization:	Fax:	
Street Address:	Email:	
City:	State:	Zip:

Request for: ☐ Copy ☐ Certified copy ☐ Record inspection ☐ Subscription to record issued on a regular basis

Delivery Method: ☐ Will pick up ☐ Mail to: _____
☐ Deliver on digital media ☐ Email to: _____

Note: *The county is not required to provide records in a digital format or on digital media if the county does not already have the technological capability to do so.*

Describe the public records being requested as specifically as possible. You may use this form and/or attach additional sheets if needed.

Consent to Non-Statutory Extension of County's Response Time
I have requested a copy of records or a subscription to records or the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, *et seq*. I understand that the county must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-business day extension. However, I hereby agree and stipulate to extend the county's response time for this request until: _____ (*month, day, year*).

Requestor's Signature: _____ Date: _____