



# Lenawee County

Administrative Offices  
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(517) 264-4508 Voice (517) 264-4512 Fax  
[www.lenawee.mi.us](http://www.lenawee.mi.us)

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## **FREEDOM OF INFORMATION ACT**

### **REQUEST FOR INFORMATION**

(MCLA 15.321 et seq; MSA 4.1801(1) et seq)

Date of Request: \_\_\_\_\_ Dept. Request No: \_\_\_\_\_

I, the undersigned, hereby request a copy of the following records from Lenawee County.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that Lenawee County may charge me for this service pursuant to Section 4 of the Freedom of Information Act. I hereby agree to pay the charge for the furnishing of this information in advance of receiving copies of files.

I also understand that Lenawee County has five (5) business days from the date of this request to (a) grant the request; (b) issue a written notice denying the request; (c) grant the request in part and issue a written notice denying the request in part; or (d) extend the time to respond by 10 days pursuant to 15.235(6) of the Act.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

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#### **FOR OFFICE USE ONLY**

Request approved/denied: \_\_\_\_\_ Date: \_\_\_\_\_

Person who picked up and/or paid for documents: \_\_\_\_\_

Description of documents supplied: \_\_\_\_\_

Number of copies: \_\_\_\_\_ Total Fees Paid: \_\_\_\_\_ Date documents supplied: \_\_\_\_\_