

**GENESEE COUNTY
FREEDOM OF INFORMATION ACT REQUEST FORM**

Pursuant to the Michigan Freedom of Information Act (P.A. 442 of 1976, as amended), I request:

☐ Copies of the records described below

☐ To be permitted to review copies of the records described below

Public Records Requested:

I understand that if I would like the records described above provided on non-paper physical media (computer disc, computer tapes, or other digital or similar media) or electronically mailed to me in lieu of paper copies, I must so indicate. I also understand that the records will be provided to me on non-paper physical media as long as that the County has the technological capability necessary to provide the records on the particular non-paper physical media.

I understand that in requesting copies of these records, I am responsible for all reasonable costs associated with the document search, examination, review, redaction and copying fees, not to exceed limits set forth in MCL 15.234, or as otherwise provided by statute, and will remit to Genesee County all such costs on or before the date of delivery. Payment of this fee becomes an obligation and is guaranteed by me to Genesee County as of the date of filing this request regardless of whether I ever pick up the records ordered in this request, or the material exceeds my anticipated volume. I further agree to remit a deposit in the amount of one-half the estimated fee at the time of making this request if the estimated fee exceeds \$50.00.

I understand that certain records that I have requested may not exist or be located under the name or description which I have provided, or may be exempt from release pursuant to the provisions of the Act and that I will be so advised by Genesee County should that be the case. I further understand that portions of the records I have requested may contain information or other material which is exempt from release and may therefore be redacted.

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I understand the County must respond to my request within five (5) business days after my request is received but that, because of the nature of my request or the volume of documents requested, additional time may be required to locate and copy the materials. Accordingly, pursuant to Section 5(2)(d) of the P.A. 442 of 1976, MCL 15.234, I agree to an extension of ten (10) additional business days to produce the records if informed of the need to do so.

I understand that the records requested shall be furnished without charge for the first \$20.00 if I provide an affidavit and declare that I am indigent or represent a non-profit organization operating under PL 106-402 as specified in Section 4(2) of P.A. 442 of 1976, as amended.

Pursuant to Section 4(4) of the P.A. 442 of 1976, MCL 15.234, Genesee County maintains a summary of its policy, procedures, and guidelines for FOIA requests on the County website at: https://www.geneseecountymi.gov/government/board_of_commissioners/freedom_of_information.php.

Signature: _____

Print Name: _____

Date: _____

Address: _____

Telephone: _____

Email address: _____

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