



**FOIA**

**Request For Public Record**

To the City of Perry FOIA Coordinator  
203 W. Polly St., Perry, MI 48872  
Phone 517-625-6155 Fax 517-625-6157

\_\_\_\_\_  
YOUR NAME OR NAME OF CONTACT PERSON

\_\_\_\_\_  
YOUR ADDRESS

\_\_\_\_\_  
PHONE NUMBER OR EMAIL ADDRESS

1. Please state the name of the public record you are searching for and include dates of the public record. \_\_\_\_\_  
\_\_\_\_\_

2. Do you want to examine the record or request a copy of it? \_\_\_\_\_

3. Do you want further subscriptions? \_\_\_\_\_  
If so, delivered what address to \_\_\_\_\_  
\_\_\_\_\_

(Subscription is valid for up to six months from date hereof and is renewable for like periods of time.)

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date