

**LARKIN CHARTER TOWNSHIP
FREEDOM OF INFORMATION REQUEST**

To: _____
(Name of Public Body)

Requested by: _____
(Name)

(Address)

(Phone)

Description of public records requested:

Nature of Request (check one below):

- Please provide a copy of the requested public record (s).
- Please provide a certificate copy of the requested public record (s).
- Please allow me an opportunity to inspect the requested public record prior to copying.

Payment (check one below):

I understand that the public body may charge me a fee for providing a copy of a public record, including the cost of copying, mailing, searching, examining, reviewing, separating, and deleting exempt information.

Attached is an affidavit of indigency. Please furnish me the requested public records with out charge for the first \$20.00 of the required fee.

I understand that the township must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-business day extension.

(Your Signature)

(Date)

FOIA FEES:

PROCESSING/PULLING REQUESTED INFORMATION
(Min. 1/2 hour)
COPIES
POSTAGE FOR MAILING

\$14.25 per hour
\$.25 per page
Actual Postage Cost

(REV 1/2011)