

**ATTACHMENT C**

**FREEDOM OF INFORMATION ACT REQUEST FORM**

I, \_\_\_\_\_, am requesting under the  
*Freedom of Information Act*, the following public records: (Please Print) \_\_\_\_\_

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My address is \_\_\_\_\_  
Street City State Zip Code

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

I understand that Montcalm County will be responding to these items pursuant to the Freedom of Information Act.

\_\_\_\_\_  
Signature Date

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**FOR MONTCALM COUNTY USE ONLY**

\_\_\_\_\_  
Date Received Received By