

FOIA Request for Public Records
Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq.
Northeast Michigan Community Service Agency, Inc.
2569 US 23 South NEMCSA: Keep original and provide copy of both sides.

Request Form Note: Requestors are not

along with Public Summary, to requestor at no charge.		Alpena, MI 49707 Phone: (989) 358-4600	required to use this forn NEMCSA may complete on	
Request No.:	Date Received:	Check if received via: Emai		
(Please Print or Type)		Date <u>delivered</u> to junk/spam folder: Date <u>discovered</u> in junk/spam folder:		
Name		Phone		
Firm/Organization		Fax	(
Street		Email		
City		State Zip		
Request for:	py	☐ Record inspection ☐ Subscript	ion to record issued on regular basis	
	Will pick up ☐ Mail to lia provided by NEMCSA:	address above	ve	
Note: NEMCSA is not re technological capability to		in a digital format or on digital media if NEMO	CSA does not already have the	
Describe the public rec	ord(s) as specifically as	s possible. You may use this form or attach a	additional sheets:	
		_	_	
Information Act, Public Act days after receiving it, and	of records or a subscription t tt 442 of 1976, MCL 15.231, tt that response may include	n-Statutory Extension of NEMCSA's Response o records or the opportunity to inspect records, pu et seq. I understand that NEMCSA must respond taking a 10-business day extension. However, I have the month, day, year).	ursuant to the Michigan Freedom of I to this request within five (5) business	
Requestor's Signature	-		Date	

Records Located on Website

If NEMCSA directly or indirectly administers or maintains an official internet presence, any public records available to the general public on that internet site at the time the request is made are exempt from any labor charges to redact (*separate exempt information from non-exempt information*).

If the FOIA coordinator knows or has reason to know that all or a portion of the requested information is available on its website, NEMCSA must notify the requestor in its written response that all or a portion of the requested information is available on its website. The written response, to the degree practicable in the specific instance, must include a specific webpage address where the requested information is available. On the detailed cost itemization form, NEMCSA must separate the requested public records that are available on its website from those that are not available on the website and must inform the requestor of the additional charge to receive copies of the public records that are available on its website.

If NEMCSA has included the website address for a record in its written response to the requestor and the requestor thereafter stipulates that the public record be provided to him or her in a paper format or other form, including digital media, NEMCSA must provide the public records in the specified format (if NEMCSA has the technological capability) but may use a fringe benefit multiplier greater than the 50%, not to exceed the actual costs of providing the information in the specified format.

Request for Copies/Duplication of Records on NEMCSA Website

I hereby stipulate that, even if some or all of the records are located on a township website, I am requesting that the township make copies of those records on the website and deliver them to me in the format I have requested above. I understand that some FOIA fees may apply.				
Requestor's Signature	Date			
Overtime Labor Costs Overtime wages shall not be included in the calculation of labor costs unless overtime is specifically stipulated by the requestor and clearly noted on the detailed cost itemization form.				
Consent to Overtime Labor Costs I hereby agree and stipulate to the township using overtime wages in calculating the following labor costs as itemized in the following categories: 1. □ Labor to copy/duplicate 2. □ Labor to locate 3a. □ Labor to redact 3b. □ Contract labor to redact 6b. □ Labor to copy/duplicate records already on township's website				
Requestor's Signature	Date			
Request for Discount: Indigence A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.00 of the fee for each request by an individual who is entitled to information under this act and who: 1) Submits an affidavit stating that the individual is indigent and receiving specific public assistance, OR 2) If not receiving public assistance, stating facts showing inability to pay the cost because of indigence. If a requestor is ineligible for the discount, the public body shall inform the requestor specifically of the reason for ineligibility in the public body's written response. An individual is ineligible for this fee reduction if ANY of the following apply: (i) The individual has previously received discounted copies of public records from the same public body twice during that calendar year, (ii) The individual requests the information in conjunction with outside parties who are offering or providing payment or other remuneration to the individual to make the request. A public body may require a statement by the requestor in the affidavit that the request is not being made in conjunction with outside parties in exchange for payment or other remuneration. Office Use: Affidavit Received Eligible for Discount Ineligible for Discount Date: Requestor's Signature:				
Request for Discount: Nonprofit Organization				
A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.00 of request by a nonprofit organization formally designated by the state to carry out activities under subtitle C of the Developmenta Assistance and Bill of Rights Act of 2000 and the Protection and Advocacy for Individuals with Mental Illness Act, if the request following requirements: (i) Is made directly on behalf of the organization or its clients. (ii) Is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the Me 1974 PA 258, MCL 330.1931. (iii) Is accompanied by documentation of its designation by the state, if requested by the township.	al Disabilities meets ALL of the			
Office Use: ☐ Documentation of State Designation Received ☐ Eligible for Discount ☐ Ineli	gible for Discount			

I stipulate that I am a designated agent for the nonprofit organization making this FOIA request and that this request is made	Date:
directly on behalf of the organization or its clients and is made for a reason wholly consistent with the mission and provisions	
of those laws under section 931 of the Mental Health Code, 1974 PA 258, MCL 330.1931:	
Requestor's Signature:	

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April 2018