[Your Name]
[Street Address]
[City, State, Zip Code]

[Date]

FOIA Coordinator Montcalm Community College 2800 College Drive Sidney, MI 48885

Dear FOIA Coordinator:

Under the Michigan Freedom of Information Act, Act 442, (§ 15.231 et seq.), I am requesting an opportunity to inspect or obtain copies of the following public records: [Describe the records or information sought with enough detail for the public agency to respond. Be as specific as your knowledge of the available records will allow.]

Please provide me with the requested documents by the following means: (for example, make available to copy, provide them for me to pick up, mail, email, etc.) I understand that the College is only required to provide records in digital format or if it is technologically capable of doing so.

(Please check the line next to any of the following that apply to your request.)

If there are any fees for searching or copying these records, please inform me if the cost vexceed \$	will
I would also like to request a waiver of all fees n that the disclosure of the requested information is in the public interest and will contribute significantly to the public's understand [Here, you can identify yourself as a representative of the news media	_
applicable and state that your request is related to news gathering purposes.] This information not being sought for commercial purposes.	
I am indigent and request a fee waiver for the first \$20 of any fee. I have or will submit the required affidavit in support of my assertion of indigency.	;
I am acting directly on behalf of a qualifying non-profit organization and request a fee wa for the first \$20 of any fee. I have or will provide documentation, if requested, in support of the assertion that the non-profit organization qualifies for this waiver.	
Even if the documents requested are available on the College's website, I am requesting they still be made available to me in the format requested above.	that

I consent to the College using overtime wages, if applicable, in calculating any labor costs associated with responding to my request.
I consent to a non-statutory extension of time, meaning more than the allowed 10-day extension, and agree that the College may provide its response on or before [date]
The Michigan Freedom of Information Act requires a response to this request within five days. If access to the records I am requesting will take longer than this amount of time, please contact me with information about when I might expect copies or the ability to inspect the requested records.
If you deny any or all of this request, please cite each specific exemption you feel justifies the refusal to release the information and notify me of the appeal procedures available to me under the law.
Thank you for considering my request. Sincerely,
[Your Name] [Your Phone number] [Your e-mail address if you are requesting transmission for our response by e-mail