

REQUEST FOR PUBLIC RECORDS City Of Plainwell

Name and brief description identifying public record desired:

Name	FOIA #
Company (If any)	Department
Address	Request:
Phone	Written: Electronic: Record Number (if any) Date filed:
I request to have the following public r Name and brief description identifying	. ,
days after it is received. The public boo	nd to my request within five (5) business dy must grant or deny all or a portion of my ten (I0) business days the period in which quest.
Signature	