



Kalamazoo County Prosecutor's Office Request for Public Record

1. Requestor Information

Name (Please print)

Phone Number

2. Public record(s) you are requesting:

(Please provide as much detail as possible)(Add additional pages if necessary)

DISCLAIMER: Multiple requests received on the same day from the same individual or organization will be treated as a single request.

- 3. Do you wish to:** Examine the record at Office of the Prosecuting Attorney?
Receive a copy via mail or e-mail (if available)?
(Large files cannot be e-mailed)
Pick up at Office of the Prosecuting Attorney?

Mail: _____
Mailing address

E-mail: _____
E-mail address

4. Submit your request to:

FOIA Coordinator
Office of the Prosecuting Attorney
227 W. Michigan Avenue, 5th Floor
Kalamazoo, MI 49007
Fax: (269) 383-0475
OPA_FOIA@Kalcouny.com

Signature

Date

Office Use:

Staff member receiving request _____

Date: _____

Request was: Granted Denied

Response completed: _____, 20__