



Michigan Department of Agriculture and Rural Development
Freedom of Information Act Request for Records
 Pursuant to 1976 PA 442, as amended

All information must be typed or printed except for written signatures

Requestor's Name	Company Name or Organization (if applicable)	Telephone ()
Address (Street and Number)		Fax ()
City	State ZIP	E-mail address

I wish to receive a copy of the following records: (Provide a detailed description of the records being requested. Attach additional sheets if necessary.)

If you previously have been in contact with someone in the Michigan Department of Agriculture & Rural Development regarding the records you are requesting, or whom you believe is knowledgeable about such records, please provide the name and work location of that person. This will help expedite locating the records you are requesting.

_____ Name of Contact	_____ Division/Office Location
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I understand that there may be a cost associated with this request.

Signature of Requestor

Date

Submit completed request to:

Of send:

**Freedom of Information Act Coordinator
 Office of Legal Affairs
 Michigan Department of Agriculture & Rural Development
 P.O. Box 30017
 Lansing, MI 48909**

**A fax: (517) 335-1423
 E-mail: MDA-info@michigan.gov**