

CITY OF WHITE CLOUD FREEDOM OF INFORMATION ACT <u>APPEAL OF DENIAL OF RECORD</u>

On _____, 20____, I filed a Freedom of Information Act request with the City of White Cloud. A copy of that request is attached. The City of White Cloud Freedom of Information Act Coordinator has denied the request, either entirely or in part.

I submit the following appeal of that decision to the City Manager.

Name:	Date:
Address:	Phone:
	Email:

Explain the reason(s) why you feel the City Manager should reverse the decision of the City's FOIA Coordinator to deny (entirely or in part) access to the requested records pursuant to the FOIA (an explanation may be made below or else attached to this form):

You will receive a response in writing. It will be mailed to you no later than 10 (ten) days after receipt of your appeal. You may direct any questions to the City's Freedom of Information Act Coordinator at (231) 689-1194.

12 N. Charles Street, P.O. Box 607, White Cloud Michigan 49349 Phone: 231-689-1194 P:\Staff Share\FOIA\Response templates and forms\Appeal Denial.docx