



**Saginaw Charter Township
Freedom of Information Act Registry**

Date Request Was Received: _____

Name of Applicant	
Address & Tele. No.	
F.O.I.A. Coordinator or Assigned Designee	
Details of enquiry/information requested: 	
Disclosure: Actions taken - what information was provided? /refused? and when? 	

If this request is assigned to a designee, please complete and return to the Manager's Office. If request is refused, contact the Manager immediately. A copy of refusal letter must be attached stating reasons for refusal.