

**CITY OF LUDINGTON**

**FREEDOM OF INFORMATION ACT REQUEST FORM**

City of Ludington FOIA Coordinator  
400 S. Harrison St.  
Ludington, Michigan 49431  
Phone (231) 845-6237

**Request For:**

- Copy
- Certified copy
- Record inspection
- Subscription to Record Issued on Regular Basis

**Delivery Method Upon Payment of Balance Due:**

- Pick up records in person
- Mail or Email (circle one) to address below

**Please Print or Type:**

Name	Phone	
Firm/Organization	Fax	
Street	Email	
City	State	Zip Code

**Specific Description of Public Records (Please Use Back of Form If More Space Is Needed):**


Dated: \_\_\_\_\_, 202\_.

Signature of Requesting Party: \_\_\_\_\_