



City of Taylor, MI
Freedom of Information Act
Appeal to the Mayor

Company Name (if applicable) or Organization (if any)		Daytime Phone
Requester's Name		Daytime Phone
Address		Email
City of Taylor	State	Zip Code

Date of FOIA request: _____ (please attach a copy). The City of Taylor Freedom of Information Act Coordinator has denied the request, either entirely or in part. I/We hereby appeal that decision to the Mayor.

Specifically describe the reason for your appeal (an explanation may be made below or you may attach a form to this request):

You will receive a decision in writing. It will be mailed to you no later than ten (10) business days of receipt of the appeal, an extension of ten (10) business days may be requested if deemed necessary. All questions regarding this appeal should be directed to the City's Freedom of Information Act Coordinator.

Office Use Only
Received by _____ Date _____