

**CITY OF ROSE CITY
FREEDOM OF INFORMATION ACT
APPEAL OF EXCESSIVE FEE**

On _____, 20____, I filed a Freedom of Information Act request with the City of Rose City. A copy of that request and a copy of the Fee Itemization for that request are attached. I believe that the fee for my request exceeds the amount permitted by the City's FOIA Procedures and Guidelines and /or Section 4 of the Freedom of Information Act.

I submit the following appeal of the excessive fee to the Mayor.

Name: _____

Date: _____

Address: _____

Phone: _____

Explain the reason(s) why you feel the Mayor should waive or reduce the fee for processing you FOIA request (an explanation may be made below or else attached to this form):

Your will receive a response in writing. It will be mailed to you no later than ten (10) days after receipt of your appeal. You may direct any question to the City's Freedom of Information Act Coordinator at 989-685-2103.

