PROSECUTOR'S OFFICE
WASHTENAW
COUNTY Michigan

Request Form

Freedom of Information Act

Please submit to:

Washtenaw County Prosecutor
Attn: FOIA Coordinator
200 N. Main St, PO Box 8645
Ann Arbor, MI 48107-8645

Fax: (734)222-6610
Email: PAFOIA@washtenaw.org

REQUESTER'S INFORMATION

Full Name: _____

Business Name (If applicable): _____

Address: _____
Street City State Zip

Telephone: _____ Email: _____

REQUESTED RECORDS/INFORMATION

Court Case No: _____Case Tracking No:_____

Defendant Name:_____

Specific Records Sought:

_____

_____

_____

_____

_____

_____

(use additional sheets, if necessary)

PURPOSE OF REQUEST

_____

_____

HOW WOULD YOU LIKE TO RECEIVE THE REQUESTED INFORMATION?

☐ Email ☐ US Mail ☐ Pick Up