

**CRAWFORD COUNTY LIBRARY
Policy Manual**

Policy No. 309.2

Subject: Freedom of Information Act Form in Compliance with Act 442 of 1976

Date request received: _____

Date of response: _____

Records requested: _____

Name, address, telephone number of person making request:

Duplication costs: 25 cents per copy x _____ copies = \$ _____

Received by: _____

Signature

Date

ADOPTED: May 22, 2001
REVIEWED: October 13, 2011, February 27, 2023
REVISED: October 13, 2011, March 9, 2023