

**City of Marshall
Request for Information
Freedom of Information Act**

Date: _____

Name: _____

Address:

Phone: _____

I am requesting the following information per the Freedom of Information Act:

I realize that the City of Marshall has up to five business days to provide this information. Also, the City may request an extension of up to ten business days if the information is difficult to provide.

Signature: _____

For office use only:

Date Received: _____ Date of Response: _____

Method of Response: _____ Processed by: _____