

Flowerfield Township, St. Joseph County
12020 M-216, Marcellus, MI 49067
Phone: (269) 646-9121 Email: mfuller@flowerfieldtownship.org.

Copies of the Township's FOIA procedures and guidelines, public summary, and forms are available on the Township website at www.flowerfieldtwp.net.
Copies of these documents also are available free-of-charge at the Clerk's office, located at 12020 M-216, Marcellus, MI 49067.

FOIA Fee Waiver Affidavit of Indigency

Name	Phone	
Firm/Organization	Fax	
Street	Email	
City	State	Zip

I request a fee waiver in connection with a Freedom of Information Act request and provide the following information concerning my present financial status in support of my request:

1. PUBLIC ASSISTANCE: I am currently receiving public assistance because of indigency <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please state the type of assistance and identify the government agency that provides it:	
2. RESIDENCE: \$ _____ per month <input type="checkbox"/> Rent <input type="checkbox"/> Mortgage <input type="checkbox"/> Room/Board <input type="checkbox"/> Live with Relatives	
3. MARITAL STATUS: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Dependents: _____ (number)	
4. INCOME: a. Employer name, address, and phone number	b. Length of Employment
	c. Average Pay <input type="checkbox"/> weekly <input type="checkbox"/> every two weeks <input type="checkbox"/> monthly Gross: \$ _____ Net: \$ _____
5. ASSETS: (state the value of car, home, bank deposits, bonds, stocks, etc. If no assets, write NONE.)	
6. OBLIGATIONS: (itemize monthly rent, installment payments, mortgage payments, child support, etc.)	

Signature: _____ Date: _____