



Freedom of Information Act Request Form

Date of Request: _____

Name: _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

Information Requested (please be specific):

PURSUANT TO S.C. CODE ANN. §30-2-50, OBTAINING OR USING PUBLIC RECORDS FOR COMMERCIAL SOLICITATION DIRECTED TO ANY PERSON IN THE STATE OF SOUTH CAROLINA IS PROHIBITED, AND IS PUNISHABLE BY A FINE OF UP TO \$500 AND IMPRISONMENT UP TO ONE YEAR, OR BOTH.

(For Official Use Only)

Date Received: _____

Response Date: _____

Department(s) Responsible for Responding: _____

Town Attorney Involvement? Yes No

Comments: _____

Associated Fees:

- Initial 30 Minutes: \$4.00
- _____ Additional Minute (\$0.40 per minute) = \$ _____
- _____ Media Discs (\$5.00 per disc) = \$ _____
- _____ Black & White Copies (\$.10 per page) = \$ _____
- _____ Color Photos (\$0.25 per page) = \$ _____

TOTAL ASSOCIATED FEES: \$ _____