



## Freedom of Information Request Form

Date of Request: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

### Information Requested (please be specific):

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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.

Signature: \_\_\_\_\_

(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: \$ \_\_\_\_\_**