



FREEDOM OF INFORMATION ACT REQUEST

Information Requested: _____

Name: _____
Last First Middle Initial

Address: _____
Street/Apt # City State Zip

Home Phone: _____ Other Phone: _____ Work Cell

Email: _____

Signature: _____

***Any copies will be charged at the rate of \$0.10 each plus staff member hourly rate.
Costs to fulfill any FOIA requests may be paid by cash, money order, or personal check.***

Section 30-4-30(B) S.C. Code of Laws, 1976, as amended, provides as follows:

The public body may establish and collect fees not to exceed the actual cost of searching for and making copies of records. Documents may be furnished when appropriate without charge or at a reduced charge when the agency determines that waiver or reduction of the fee is in the public interest. The custodian of the public records may charge a reasonable hourly rate for making records available to the public and may receive a reasonable deposit of these rates before searching for or making copies of the records.

IMPORTANT: Section 30-2-50(b) S.C. Code of Laws provides that personal information obtained from public records is prohibited from being used for commercial solicitation purposes.

OFFICIAL USE ONLY

Assigned to: _____ Date Assigned: ____ / ____ / ____

Fee: _____ Date Completed: ____ / ____ / ____

Method of Payment: _____ Date Due: ____ / ____ / ____