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8th Circuit Solicitor's Office

600 Monument Street, Suite 203
PO Box 516
Greenwood, SC 29646
864.942.8800

FREEDOM OF INFORMATION ACT REQUEST FORM

NAME: _____ DATE OF REQUEST: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: (____) _____ FAX NUMBER: (____) _____

EMAIL: _____

Please indicate your preferred method of delivery by checking the appropriate box below. If possible, we will respond by the preferred method; however, some responses may not be suitable for fax or email due to quantity, size or medium of the document.

- Mail
- Fax
- Email
- Request to review information on premises

Pursuant to the Freedom of Information Act, Se 30-4-10, et seq., Code of Laws of South Carolina (1976, as amended), I request a copy of the following (please be specific):

I understand that obtaining or using public records for commercial solicitation directed to any person in this State is prohibited under Section 30-2-50 of the South Carolina Code of Laws.

I understand that the 8th Circuit Solicitor's Office has ten (10) business days, excluding weekends and State holidays, in which to respond unless the information requested is more than twenty-four (24) months old, in which case the 8th Circuit Solicitor's Office has twenty (20) business days to respond. I also understand that I may be required to pay the costs of copying, research, and postage associated with my request.

SIGNATURE: _____

Return form to: 8 th Circuit Solicitor's Office 600 Monument Street, Suite 203 PO Box 516 Greenwood, SC 29648
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FOR OFFICE USE ONLY	
REQUEST ASSIGNED TO: _____	DATE OF COMPLETION: _____
DATE OF ASSIGNMENT: _____	FEE FOR SERVICES: _____
DATE RESPONSE DUE: _____	METHOD OF PAYMENT: _____