



City Clerk
P.O. DRAWER 1749 SPARTANBURG,
SC 29304-1749
Phone: 864-596-2019
Email: cmcintyre@cityofspartanburg.org

Date of Request: _____

FREEDOM OF INFORMATION ACT REQUEST FORM

(Please print clearly)

Your Name: _____

Your Mailing Address: _____

Your Email Address: _____

Your Phone Number: _____

City of Spartanburg:

Under the South Carolina Freedom of Information Act, I am requesting the following documentation:

I prefer to receive this information by: (check one)

U.S. Mail Email Fax In Person

Sincerely,

Signature

**CITY OF SPARTANBURG, SC
FREEDOM OF INFORMATION REQUEST FOR PUBLIC RECORDS**

	<u>FOIA ACTIVITY</u>	<u>Associated Charges</u>
1.	<u>Search/Retrieval Time</u> * First 30 minutes * Every additional 30 minutes	No Charge \$5.00 per every 30 minutes
2.	<u>Black & White Copies</u> Size 8 1/2" x 11" and or legal * First 50 pages * Each additional page Size 11" x 17"	No Charge 15 cents per page 15 cents per page
3.	<u>Color Copies</u>	20 cents per page
4.	<u>Digital Copy on CD</u>	\$5.00 each
5.	<u>Digital Video Copy on DVD</u>	\$10.00 each
6.	<u>Accident Report</u> * Each copy	\$1.00 each
7.	<u>Incident Report</u> * Each additional copy	\$1.00 each
8.	<u>Police Mugshot Copy</u>	\$3.00 each
9.	<u>Photographs</u> * Digital Copies on Photo CD * Prints	\$2.00 At Cost for Reproduction
10.	<u>Standard Maps/Plots</u> * Up to 11" x 17" size * Anything over 11" x 17"	50 cents per copy \$10.00 per copy