



CITY OF COLUMBIA  
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## FREEDOM OF INFORMATION ACT REQUEST FORM

TO: City of Columbia

FROM:

YOUR ADDRESS:

YOUR E-MAIL:

YOUR PHONE NUMBER(S) (DAYTIME):

**PLEASE STATE WHAT PUBLIC RECORDS YOU ARE REQUESTING AND INCLUDE THE FOLLOWING: ADDRESSES, SPECIFIC DATES AND TIMES OR A DATE RANGE, AND/OR NAME(S), ETC.**

I REQUEST THE FOLLOWING INFORMATION UNDER THE SOUTH CAROLINA FREEDOM OF INFORMATION ACT:

**COPY FEE SCHEDULE:**

\$20.00 per hour for search, retrieval and redaction time  
\$ 5.00 per disc  
\$ .30 per page B/W- Letter size  
\$ .75 per page Color- Letter size  
\$ .40 per page B/W - Legal  
\$ 1.00 per page Color - Legal

**\*\*Non-standard sizes will be billed at the actual cost to the City\*\***

The City bills only for its costs to fulfill each request. Invoices will be sent to you and payment is required in full before the public records are released to you.

**\*\*Effective May 19, 2017, it is a crime to knowingly obtain or use personal information from a public body for commercial solicitation. S.C. Code §30-2-50. \*\***

SIGNATURE

DATE