

Freedom of Information Act Request Form



Date: _____

Name: _____

Company Name (if applicable): _____

Address: _____

City, State, Zip Code: _____

Telephone #: _____

Email: _____

Under the Freedom of Information Act (FOIA), I would like to review and/or copy available files for the following:

Signature of Requestor

Request should be mailed; 250 N. Walnut ST., P.O. Drawer 60, Winnsboro, SC 29180, emailed Karen.roseberry@fairfield.sc.gov or delivered to the attention of Karen Roseberry, 250 N. Walnut Street, Winnsboro. (Office hours: 1:00 pm – 5:00 pm); Telephone (803)815-4000