



## FREEDOM OF INFORMATION REQUEST FOR PUBLIC RECORDS

To: Clerk to Council, City Hall  
FOIA Compliance  
P.O. Drawer 939  
Georgetown, SC 29442  
Email: cityfoiarequest@cogsc.com

From: \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_

Description of records requested:

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Are you asking for these records for a commercial use/purpose?     Yes     No

Please indicate the format in which you would like the City to respond to your request. Please know the City may not be able to accommodate the requested format. Cost from City FOIA Summary may be applied to any of these formats.

Inspection Only     Hard Copy     Email: \_\_\_\_\_     Digital Format: PDF only

By my signature I hereby state that I have received the City of Georgetown's FOIA process, including the fee schedule outlining possible charges I may incur as part of this request.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only:**

Date Received: \_\_\_\_\_ Due Date: \_\_\_\_\_ Response Date: \_\_\_\_\_

Department (s) Responsible for Responding: \_\_\_\_\_

City Staff Assigned Response: \_\_\_\_\_

Notations: \_\_\_\_\_

Associated Fees: \_\_\_\_\_ Paid:  Yes     No