



Town of Summerton

FREEDOM OF INFORMATION ACT REQUEST FORM

Date of Request: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Signature: _____

Information Requested (please be as specific as possible—**type or print clearly**): _____

PLEASE RETURN THE FORM TO:

SUMMERTON TOWN HALL
Frances Feagin, Deputy Town Clerk
Post Office Box 279
Summerton, SC 29148

BY FAX: 803-485-2914

BY EMAIL: deputytownclerk@townofsummerton.com

**** IF YOU HAVE ANY QUESTIONS, PLEASE CALL 803-485-2525 ****

FOR OFFICIAL USE ONLY

Date FOIA Form Received: _____ Signature of Employee Receipt: _____

Date Receipt Response Date: _____ Date Response Provided to Requestor: _____

Document Search Assigned to: _____ Date of Assignment: _____

Date Documents Provided to Requestor: _____

As provided by South Carolina Code Annotated Section §30-4-30 B, the Town will provide a response within fifteen days (excepting Saturdays, Sundays and legal public holidays) of the receipt of a Freedom of Information Act (FOIA) Request. However please note that we are not required to produce the requested documents within fifteen working days.