

Henry McMaster GOVERNOR  
Joshua D. Baker DIRECTOR  
P.O. Box 8206 > Columbia, SC 29202  
[www.scdhhs.gov](http://www.scdhhs.gov)

## FREEDOM OF INFORMATION ACT REQUEST FORM

To: South Carolina Department of Health and Human Services

Your Contact Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I prefer to receive this information by:  Mail  Email

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date