



Speakers Bureau Request Form

County: _____ Today's Date: _____

Person making the request: _____ Phone: _____

Email: _____ Fax: _____

Speaking Date: _____ Alternative Speaking Date: _____ Meeting Time: _____

Group's Name: _____

Type of Group: _____

Type of presentation desired:

Time allotted for presentation: _____ Expected Number of Attendance: _____

Contact Person No. 1: _____ Phone: _____

Contact Person No. 2: _____ Phone: _____

Location/Address where meeting will be held:

Directions to meeting location from major highway and/or Interstate:

Your Speaker may require various audio/visual aides. Please place a check by the items you can provide onsite:

Screen _____ VCR _____

Projector _____ TV _____

Please FAX completed form to SCDOT's Community Relations Office at (803) 737-5011.
For additional information please phone Vivian Patterson at (803) 737-6341.