

Office of Public Affairs - Freedom of Information Act

PLEASE ENSURE THAT YOUR BANK ACCOUNT IS SET UP FOR ACH PAYMENTS

Returned checks and returned ACH payments are subject to a \$50 fee (see Fairfax County Code \S 1-1-17)

Required fields are highlighted with an asterisk.

- Please enter the following information $$	
VFOIA Number *	
First Name *	
Last Name *	
Last Name	
Address	
City	
State	
Zip	
Phone	
Email *	
– Payment Information ––––––––––––––––––––––––––––––––––––	
Payment Amount *	
	Make Payment