

Summit Pointe

FOIA Detailed Cost Itemization

Date:	Prepared for Request No:	Date Request Received:	Electronic? (Y / N)	Is This a Cost Estimate or a Bill?

Estimated Time Frame to Provide Records:

(Days or Date)

	Notes:	Hourly Rate:	Plus Fringe Benefit cost per hour:	Total Charge per 15- minute increment:	# of 15- minute increments:	Total Cost Charged:
1. Labor Cost for Copying/ Duplication:	@ lowest-paid employee capable			\$ -		\$ -
				\$ -		\$ -
2. Labor Cost to Locate:	@ lowest-paid employee capable			\$ -		\$ -
				\$ -		\$ -
3a. Employee Labor Cost for Redacting:	@ lowest-paid employee capable			\$ -		\$ -
				\$ -		\$ -
3b. Contracted Labor Cost for Redacting:	outside attorney or consultant, not to exceed 6x state min. wage (currently 6 x \$8.15 = \$48.90)			\$ 12.23		\$ -
				\$ 12.23		\$ -

	Notes:	Cost per Sheet:	# of Sheets:	Cost per Digital Media:	# of Items:	Total Cost Charged:
4. Copying/ Duplication Cost:	actual cost per sheet (currently \$.10/sheet) and must copy double-sided; and actual cost per non-paper digital media					
						\$ -
						\$ -

	Notes:	Cost per envelope/ packaging:	# of Envelopes or Packages:	Cost of Postage:	Expedited shipping or insurance:	Total Cost Charged:
5. Mailing Cost:	actual cost of least expensive form of delivery, expedited only if requested					
						\$ -
						\$ -

	Notes:	Cost per Sheet:	# of Sheets:	Cost per Digital Media:	# of Items:	Total Cost Charged:
6a. Copying/ Duplicating Cost for paper copies of Records Already on Website:	actual cost per sheet, not to exceed \$.10/sheet and must copy double-sided; and actual cost per non-paper digital media					
						\$ -
						\$ -

	Notes:	Hourly Rate:	Plus Fringe Benefit cost per hour:	Total Charge per 15-minute increment:	# of 15-minute increments:	Total Cost Charged:
6b. Labor Cost for Copying/ Duplicating Records Already on Website:	@ lowest-paid employee capable					
				\$ -		\$ -
				\$ -		\$ -

Discount: Nonprofit Organization						
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\$20 Discount if Eligible Organization under Mental Health Code:

Subtotal After Discount: \$

Deposit: Good Faith	Notes:	Total Estimate or Actual Fee:	Percent Requested:	Deposit Amount Required:	Date Paid:
	Can request if estimate or charge exceeds \$50.00; maximum request 50% of total fee, or 100% if unpaid prior request	\$ -		\$ -	

Late Response Labor Costs Reduction:	Notes:	# Days Over Required Response Time:	x 5% = Total Percent Reduction:	Total Labor Costs:	Minus Reduction:	= Reduced Total Labor Costs:
	Reduce only charges for labor costs, by 5% for each day Summit Pointe exceeds time permitted, up to 50% reduction			\$ -	\$ -	\$ -

TOTAL BALANCE DUE:	\$ <input type="text" value="-"/>	Date Paid:	<input type="text"/>
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Request will be processed, but balance must be paid before copies may be picked up, delivered or mailed.