



**FREEDOM OF INFORMATION ACT (FOIA) FEE ITEMIZATION**

REQUESTOR: \_\_\_\_\_ DATE: \_\_\_\_\_

Pursuant to Section 4 of the Michigan Freedom of Information Act, MCL 15.234, the following costs will be charged for responses to FOIA requests in accordance with the City of Charlevoix's FOIA Procedures and Guidelines and fees adopted by City Council. If the City is seeking a 50% deposit prior to providing the public records sought, the estimate is itemized on this form, in sections 1-5 below. The City's FOIA Summary of Procedures and Guidelines can be found on the City's website at [www.charlevoixmi.gov](http://www.charlevoixmi.gov).

Labor costs shall not be more than the hourly wage of the City's lowest paid employee capable of performing the task, regardless of whether that person is available or actually performs the labor. Labor costs will be estimated and charged in 15 minute time increments. All partial time increments will be rounded down. No overtime will be charged unless authorized by the Requestor.

**1. EMPLOYEE LABOR COST TO LOCATE & EXAMINE RECORDS**

		ESTIMATED	ACTUAL
Wage charged (includes fringes) # of 1/4 hour increments x rate	\$32.80/hour or \$8.20/ ¼ hour _____ increments x \$8.20/ ¼ hour	\$ _____	\$ _____
OT Wage if requested (including fringes) # of 1/4 hour increments x rate	\$49.20/hour or \$12.30/ ¼ hour _____ increments x \$12.30/ ¼ hour	\$ _____	\$ _____

**2. EMPLOYEE LABOR COST TO REDACT INFORMATION (separate exempt from non-exempt information)**

		ESTIMATED	ACTUAL
Wage charged (includes fringes) # of 1/4 hour increments x rate	\$32.80/hour or \$8.20/ ¼ hour _____ increments x \$8.20/ ¼ hour	\$ _____	\$ _____
OT Wage if requested (including fringes) # of 1/4 hour increments x rate	\$49.20/hour or \$12.30/ ¼ hour _____ increments x \$12.30/ ¼ hour	\$ _____	\$ _____

**3. EMPLOYEE LABOR COST TO COPY, DUPLICATE & TRANSFER RECORDS TO NON-PAPER PHYSICAL MEDIA**

		ESTIMATED	ACTUAL
Wage charged (including fringes) # of 1/4 hour increments x rate	\$32.80/hour or \$8.20/ ¼ hour _____ increments x \$8.20/ ¼ hour	\$ _____	\$ _____
OT Wage if requested (including fringes) # of 1/4 hour increments x rate	\$49.20/hour or \$12.30/ ¼ hour _____ increments x \$12.30/ ¼ hour	\$ _____	\$ _____

**4. COPYING, DUPLICATION AND/OR PRINTING COST**

		ESTIMATED	ACTUAL
Letter, legal or ledger size paper@\$0.10/sheet	# of sheets _____ x \$0.10/sheet	\$ _____	\$ _____
Blueprints duplicated in-house	# of prints _____ x \$3.00/blueprint	\$ _____	\$ _____
Blueprints, etc. contracted for duplication	Actual cost	\$ _____	\$ _____
Actual & most reasonably economical cost of physical digital media	# of flash drives _____ x \$ _____/drive	\$ _____	\$ _____
	# of discs _____ x \$ _____/disc	\$ _____	\$ _____
	Other media	\$ _____	\$ _____
<b>SUBTOTAL COPYING</b>		\$ _____	\$ _____

**5. MAILING COST**

		ESTIMATED	ACTUAL
Actual & most reasonably economical cost	Envelope/packaging	\$ _____	\$ _____
	Postage	\$ _____	\$ _____
	Postal delivery confirmation	\$ _____	\$ _____
	Expedited delivery (if requested)	\$ _____	\$ _____
	Insurance (if requested)	\$ _____	\$ _____
<b>SUBTOTAL MAILING</b>		\$ _____	\$ _____



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6. SUBTOTAL FEES BEFORE WAIVER, DISCOUNT OR DEPOSIT			
		ESTIMATED	ACTUAL
	1. Labor cost to locate	\$ _____	\$ _____
	2. Labor cost to redact	\$ _____	\$ _____
	3. Labor cost to copy	\$ _____	\$ _____
	4. Copying cost	\$ _____	\$ _____
	5. Mailing cost	\$ _____	\$ _____
	<b>SUBTOTAL FEES</b>	\$ _____	\$ _____
7. WAIVER, DISCOUNT, REDUCTION OR DEPOSIT			
Waiver: Public interest	Amount determined to be in general public's interest		(\$ _____)
Discount: Indigence	\$20 reduction for indigence		(\$ _____)
Discount: Non-profit organization	\$20 reduction for non-profit		(\$ _____)
Reduction: Late FOIA response	Deduct 5% of fee x _____ days (not to exceed 50%)		(\$ _____)
Good Faith Deposit: If total estimated fee exceeds \$50	\$ _____ est. fee x 50% Deposit paid this date _____ Received by _____ Receipt# _____		(\$ _____)
Fee paid this date _____ Received by _____ Receipt# _____		<b>TOTAL DUE</b>	\$ _____