

**FREEDOM OF INFORMATION ACT FEE ITEMIZATION  
VILLAGE OF ARMADA**

<p>Fringe Benefit Multiplier x Applicable Hourly Rate</p> <p>_____ % x \$ _____ (Search)</p> <p>_____ % x \$ _____ (Redaction)</p> <p>_____ % x \$ _____ ÷ 60 (Duplication)</p>	<p align="center">Total Labor Charges Per Hour</p> <p>\$ _____ per hour for the search</p> <p>\$ _____ per hour for redaction</p> <p>\$ _____ per minute for duplication</p>	
<p>Labor costs for searching for, locating, and examining public records in order to fulfill a granted written request</p>	<p align="center">_____ hours x \$ _____ per hour (Increments of ¼ of an hour, rounded down)</p>	<p align="center">\$ _____ plus</p>
<p>If done by a Village employee, labor costs directly associated with separating and deleting exempt information from nonexempt information ("redaction")</p>	<p align="center">_____ hours x \$ _____ per hour (Increments of ¼ of an hour, rounded down)</p>	<p align="center">\$ _____ plus</p>
<p>If done by a contractor, labor costs directly associated with separating and deleting exempt information from nonexempt information ("redaction")</p>	<p align="center">_____ hours x \$ _____ per hour Contractor: _____ (Increments of ¼ of an hour, rounded down, hourly rate not to exceed 6 times minimum wage)</p>	<p align="center">\$ _____ plus</p>
<p>Labor costs directly associated with duplication or publication, including making paper or digital copies or transferring digital public records onto nonpaper physical media or through other electronic means</p>	<p align="center">_____ minutes x \$ _____ per minute (Increments of 1 minute, rounded down)</p>	<p align="center">\$ _____ plus</p>
<p>Actual cost of any media</p>	<p align="center">_____ media x \$ _____ per media _____ media x \$ _____ per media</p>	<p align="center">\$ _____ plus</p>
<p>Actual total incremental cost of necessary duplication or publication for paper copies of public records, not including labor (8½ x 11 and/or 8½ x 14 only)</p>	<p align="center">_____ sheets x \$ 0.05 per b&amp;w sheet _____ sheets x \$ 0.10 per color sheet</p>	<p align="center">\$ _____ plus</p>
<p>Actual total incremental cost of necessary duplication or publication for paper copies of public records, not including labor (<u>not</u> 8½ x 11 or 8½ x 14)</p>	<p align="center">_____ sheets x \$ _____ per b&amp;w sheet _____ sheets x \$ _____ per color sheet</p>	<p align="center">\$ _____ equals</p>
<p align="center">Subtotal</p>		<p align="center">\$ _____ plus</p>
<p>Actual cost of mailing (may include least expensive form of postal delivery confirmation)</p>	<p align="center"><input type="checkbox"/> Applicable   <input type="checkbox"/> Not Applicable</p>	<p align="center">\$ _____ minus</p>
<p>Indigency cost waiver (first \$20) (affidavit provided)</p>	<p align="center"><input type="checkbox"/> Applicable   <input type="checkbox"/> Not Applicable</p>	<p align="center">(\$ _____) minus</p>
<p>State-designated non-profit agency waiver</p>	<p align="center"><input type="checkbox"/> Applicable   <input type="checkbox"/> Not Applicable</p>	<p align="center">(\$ _____) minus</p>
<p>Good Faith Deposit</p>	<p align="center"><input type="checkbox"/> Paid</p>	<p align="center">(\$ _____) equals</p>
<p align="center">Total Owed (Check or Money Order Payable to Village of Armada)</p>		<p align="center">\$ _____</p>

Date: \_\_\_\_\_  
FOIA Coordinator or Designee

Request Identifier and Date Received