

# STANDARD ITEMIZED FEE FORM<sup>1</sup>

Pursuant to the Michigan Freedom of Information Act (FOIA), MCL 15.234, the following costs will be charged for responses to FOIA requests:	<b>Total Cost</b>				
<b>1. Labor costs – searching for, locating, and examining public records</b> Hourly Wage Charged: \$ <u>20.00</u> <u>      </u> 15 minute increments (rounded down)	If fee charged, describe nature of unreasonably high costs to Academy: _____ _____ _____ \$ _____				
<b>2. Labor costs – separating and deleting of exempt information from nonexempt information</b> Hourly Wage Charged: \$ <u>20.00</u> <u>      </u> 15 minute increments (rounded down)	If fee charged, describe nature of unreasonably high costs to Academy: _____ _____ _____ \$ _____				
<b>3. Actual cost of records provided on nonpaper physical media</b> (i.e. computer discs, computer tapes, or other digital media).	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Type of Media</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Cost</u></th> </tr> </thead> <tbody> <tr> <td style="border-bottom: 1px solid black;"> </td> <td style="border-bottom: 1px solid black;"> </td> </tr> </tbody> </table> \$ _____	<u>Type of Media</u>	<u>Cost</u>		
<u>Type of Media</u>	<u>Cost</u>				
<b>4. Paper copies</b>	<u>  10+  </u> pages x \$0.10/page = \$ _____				
<b>5. Labor costs – duplication or publication, including making paper and digital copies</b> Hourly Wage Charged: \$ 15.00	<u>      </u> time increment of Academy's choosing \$ _____				
<b>6. Actual cost of mailing</b> *By least expensive form of postal delivery confirmation unless requestor stipulates otherwise	<b>Envelopes/Packaging:</b> \$ _____ <b>Postage:</b> \$ _____ \$ _____				
<b>Fee reduction?</b> List reason (indigence or protection and advocacy organization): _____	Subtract \$20 or Not Applicable _____				
	<b>Estimated Cost</b> \$ _____				
<b>Good faith deposit required?</b>	If estimated cost exceeds \$50, a good faith deposit of 50% of estimated cost is required <i>before</i> request will be processed \$ _____ paid _____ (date)				
Note: Request will be processed, but balance must be paid <i>before</i> copies may be picked up, delivered, or mailed	<b>Balance Due</b> \$ _____				

<sup>1</sup> This form provides a detailed itemization of fees charged for a request made under the FOIA, as required by MCL 15.234(4).