## BAY-ARENAC INTERMEDIATE SCHOOL DISTRICT FREEDOM OF INFORMATION ACT RESPONSE

If payment is required as indicated in the accompanying letter, requested information will not be released until the payment described below is received. Please call the BAISD contact person indicated in the accompanying letter or return this form if you decide you do not wish to receive this information. After 90 days it will be assumed that you no longer require the requested documents.

REQUESTOR'S NAME AND ADDRESS:			
BILL CALCUATION		AMOUNT	
LABOR:			
Searching for, locating, and examining the material:			
No. of Hours: X Wage Rate (including up to 50% for fringes) <u>\$21.36</u>		\$ 0.00	
Reviewing the material, including separating exempt from non-exempt material:		<b>A A A A</b>	
No. of Hours: X Wage Rate (including up to 50% for fringes) <u>\$21.36</u>		\$ 0.00	
POSTAGE: (Actual Cost)		\$ 0.00	
DUPLICATING:			
Labor:			
No. of Hours X Wage Rate (including up to 50% for fringes) <u>\$21.36</u>		\$ 0.00	
Paper:			
No. of Pages X Copying Rate <u>\$.10</u> per page.		\$ 0.00	
NON DADER DUVCICAL MEDIA: Describe (a.e., CD/a, DVD/a, flack drives, etc.)			
NON-PAPER PHYSICAL MEDIA: Describe (e.g., CD's, DVD's, flash drives, etc.)			
		\$ 0.00	
		Ş 0.00	
Make check (business/personal) or money order payable to: Bay-Arenac ISD			
Mail Check/Money Order to:		TOTAL	
Bay-Arenac ISD		\$ 0.00	
4228 Two Mile Road			
Bay City, MI 48706			
Return a Copy of this Invoice with your Payment			
*Please note that if a deposit is requested, (total is greater than \$50.00), the indicated amount		DEPOSIT*	
is an estimate of the cost of complying with your request. The actual cost may vary from this		\$ 0.00	
amount.			
For Internal Use	Only		
Requested information to be:		BALANCE TO BE PAID*	
<ul> <li>Provided without charge</li> </ul>	Check/M.O.#		
Mailed upon receipt of payment		\$ 0.00	
Paid and picked up in person	From:		
	Dete de sum ente me l'a d	Data dagungarta siste da	
Date payment received:	Date documents mailed:	Date documents picked up:	
Deposit payment in BAISD Account Number:			

Note: Fee waivers and discounts are outlined in Procedures and Guidelines, Section II.D.

Distribution: Requestor BAISD Business Office BAISD FOIA Coordinator (Original)