

For Finance Department:

Records Provided By: _____

Straight Copies _____ x _____ = \$ _____

Research Cost (see below) \$ _____

Total Paid \$ _____

Request for Public Record

Date Submitted: _____

Name of Person Requesting: _____

Address: _____

Business: _____

Business Address: _____

The following Public Records are requested:

(choose one) View _____ Copy _____

 Meeting Minutes Date(s) of Meeting(s) _____ Other _____

If you wish to be notified when your copies are ready or if any questions arise concerning your request please give us a contact number. _____

PLEASE NOTE: If you are marking this request other than in person and your request will incur research fees (see below), the estimated fee will be calculated and the request will be held for your approval and deposit. If you have given us a contact number, we will call and give you the estimate. You are not required to provide a contact number. If you have not given us a contact method and fees will be incurred beyond copy costs, or questions arise, your request will be held until you contact us. Copies made per requests, which will not incur research fees, submitted without a contact number, will be produced and held for 30 days for pick-up.

FEES (Please Read)

One Sided 8 1/2" x 11" Copy \$.25

One Sided 8 1/2" x 14" Copy \$ 1.00

One Sided 11" x 17" Copy \$ 1.00

Two Sided Copy \$.25

Audio Tape – 90 min. tape \$ 3.00

Computer Disk – 3 1/2 disk \$1.00

Compact Disk – CD \$1.00

SERVICE CHARGE – A fee based on the custodian's or his/her designee's rate of pay will be charged for extensive time, use of information technology, resources, or clerical labor. Extensive means more than 15 minutes to locate, review for confidential material, remove confidential material, copy and re-file the requested material. Charges will be collected at the current rate of pay for the records custodian and/or his/her designee. Estimated cost of extensive research and copying must be paid in advance. Any differences will be collected or refunded when the material is picked up.

Designated Custodian – City Clerk

Assigned Designee – Administrative Secretary

Fees to be assessed at the current hourly rate of pay, in 15-minute increments.

For Office Use Only**Estimate of Research Fees:**

Person assigned to:

Research = \$ _____ per 15-minute

Estimated time = _____ (minutes)

Estimated Cost =

_____ X \$ _____ = \$ _____
 Time/15 Research cost

Actual Research Fees:

Start time: _____

Finish time: _____

Total Time – 15 minutes = _____

Cost =

_____ x \$ _____ = \$ _____
 Time/15 Research cost