

OPEN RECORDS REQUEST

*DESCRIPTION OF INFORMATION (please be specific): _____

*REQUESTED BY: _____ **CHARGE**

*ADDRESS: _____ Yes _____

_____ No _____

*TELEPHONE _____

	<u>NUMBER</u>	<u>TOTAL</u>
1. STANDARD-SIZE PAPER COPIES: (UP TO 8-1/2" X 14")	@\$.10/PAGE	\$ _____
OR (MINIMUM \$5.00 IF LESS THAN 20 COPIES)	MINIMUM	\$ _____
2. NONSTANDARD-SIZE COPIES:		
- DISKETTE	@\$1.00/EACH	\$ _____
- MAGNETIC TAPE	@\$10.00/EACH	\$ _____
- PAPER	@\$.50/EACH	\$ _____
- OTHER	@ACTUAL COST	\$ _____
3. PERSONNEL CHARGES: (OVER 50 COPIES)	@\$15.00/HOUR	\$ _____
4. OVERHEAD CHARGES: (OVER 50 COPIES)		
(20% OF TOTAL PERSONNEL CHARGES)	X \$.20	\$ _____
5. REMOTE DOCUMENT RETRIEVAL CHARGES:	@ACTUAL COST	\$ _____
6. COMPUTER RESOURCE CHARGES:		
- MIDSIZE	@\$3.00/MINUTE	\$ _____
- CLIENT/SERVER	@\$1.00/MINUTE	\$ _____
- PC OR LAN	@\$.50/MINUTE	\$ _____
7. PROGRAMMING TIME CHARGES	@\$26.00/HOUR	\$ _____
8. MISCELLANEOUS SUPPLIES	@ACTUAL COST	\$ _____
9. POSTAGE AND SHIPPING CHARGES	@ACTUAL COST	\$ _____
10. FAX CHARGES:		
- LOCAL	@\$.10/PAGE	\$ _____
- LONG DISTANCE, SAME AREA CODE	@\$.50/PAGE	\$ _____
- LONG DISTANCE, DIFFERENT AREA CODE	@\$1.00/PAGE	\$ _____
11. OTHER COSTS:	@ACTUAL COST	\$ _____
TOTAL DUE		\$ _____

NOTE: PERSONNEL AND OVERHEAD CHARGES CAN BE ADDED TO REQUESTS FOR COPIES IF THE INFORMATION "REQUIRES A SUBSTANTIAL AMOUNT OF TIME TO LOCATE OR PREPARE FOR RELEASE."

REMIT TO:	Mr. Mike Marcus	Method of Payment:	Cash _____
	Records Management Officer		Check _____
	Waller Independent School District		Other _____
	1918 Key Street	Payment Received:	_____
	Waller, TX 77484	Account Code:	_____
	(936) 931-0314		

Remarks: Mailed: _____

Picked Up: _____

SIGNATURE: _____ DATE: _____

Records Prepared By: _____

Campus/Location: _____

* Information to be completed by requestor.