

## City of Valdosta – Open Records Request Routing Form

**RECEIPT OF REQUEST:**

<b>Requester:</b>	<b>Phone #:</b>
<b>Date Request Received:</b>	<b>Time Received:</b>
<b>Received by:</b>	<b>Method of Request: Verbal/Formal/Email</b>
<b>Three Day Deadline Date:</b>	
<b>Designated Responsible Department for Retrieval:</b>	
<b>Date and Time forwarded:</b>	<b>Request given to:</b>
<b>Attorney Approval Required: Yes or No</b>	
<b>Attorney's Recommendation:</b>	

*Please return requester's information and this form to City Clerk by required date.*

**ESTIMATED COST ESTIMATE:**

The following cost estimate is based on the direct administrative costs for the search, retrieval, and preparation of records for copying under O.C.G.A. 50-18-70. If a deposit is required, any payment over the actual cost will be refunded. (There is no charge for the first quarter hour of time expended in record preparation.)

Estimated time of record preparation	____ Hrs X \$ ____	\$
Estimated time of copying	____ Hrs X \$ ____	\$
\$0.10 per page copy	____ Pages @ \$0.10	\$
\$10.00 first audio tape copy*	____ Copies @ \$10.00	\$
\$5.00 each additional audio tape copy	____ Copes @ \$5.00	\$
\$5.00 computer disc	____ Disc @ \$5.00	\$
Postage		\$
Other costs:		\$
<b>Total estimated costs:</b>		<b>\$</b>

**ACTUAL COST:**

Actual time of record preparation	____ Hrs X \$ ____	\$
Actual time of copying	____ Hrs X \$ ____	\$
\$0.10 per page copy	____ Pages @ \$0.10	\$
\$10.00 first audio tape copy	____ Copies @ \$10.00	\$
\$5.00 each additonal tape copy	____ Copies @ \$5.00	\$
\$5.00 computer disc	____ Disc @ \$5.00	\$
Postage		\$
Other costs:		\$
<b>Total actual costs:</b>		<b>\$</b>

**INFORMATION REVIEWED AND RECOMMENDED FOR RELEASE TO REQUESTER:**

Department Head/Director/Division Head: \_\_\_\_\_ Date: \_\_\_\_\_  
 City Attorney's Office \_\_\_\_\_ Date: \_\_\_\_\_  
 City Clerk: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR CITY CLERK USE ONLY:**

Date information received from responsible department: \_\_\_\_\_  
 Date information given to requester: \_\_\_\_\_ Invoice/Amount Issued: \_\_\_\_\_  
 Payment received: \_\_\_\_\_

*\*Includes materials, time and retrieval costs*