

TPIA#

Wimberley ISD Open Records Request Form

Organization/Business:	Contact Name:
Phone:	Address:
E-mail:	City/State/Zip:

In accordance with school policy GBA (LEGAL) and the Texas Public Information Act, I hereby request that copies of the following records of the District be made available for my inspection or duplication:

Documents/Records Requested (details):

I would like these documents/records to be made available by the following method:

- E-mailed to the above address Picked up at the Superintendent's Office Mailed to the above address
- View at the Superintendent's office

I agree to pay the duplication rate of:

- 10¢ per page *

*Depending on the nature of the request, **other charges may apply in accordance with state law and district policy. SEE PAGE 2**

Signature:	Date:
------------	-------

E-mail to: RecordsRequest@wimberleyisd.net **or Mail / Deliver to:** WISD Central Office
 Attn: Superintendent Secretary
 951 FM 2325
 Wimberley, TX 78676

FOR OFFICE USE ONLY

See Attached Request

Date Received	Date Date: 10 Business Days	Person Responsible:	Return Responsive Docs to:
Person(s) to Notify:			
Notes on Legal Timeline:			
Other Notes:			
Time Spent:			

ACTION NEEDED

Contact Legal:	Person Responsible:		
Freeze Emails:	Person Responsible:	Release Date:	
Freeze Emails:	Person Responsible:	Release Date:	
Retain all applicable paperwork:			
Other:			

Wimberley Independent School District

COPY CHARGES – BILLING FORM

Requested By: _____

Telephone: _____

Address: _____

AUTHORIZED BY THE GENERAL SERVICES COMMISSION UNDER THE TEXAS OPEN RECORDS ACT

Standard-Size Paper Copies: _____ @ \$0.10/page \$ _____

Nonstandard-Size Copies:

*Diskette _____ @ \$1.00/each \$ _____

*Magnetic Tape
9-track _____ @ \$11.00/each \$ _____

8mm _____ @ \$12.00/each \$ _____

4mm _____ @ \$13.50/each \$ _____

*VHS Video Cassette _____ @ \$2.50/each \$ _____

*Audio Cassette _____ @ \$1.00/each \$ _____

*Paper Oversize _____ @ \$0.50/each \$ _____

*Data Cartridge
2000 Series _____ @ \$17.50/each \$ _____

3000 Series _____ @ \$20.00/each \$ _____

6000 Series _____ @ \$25.00/each \$ _____

9000 Series _____ @ \$35.00/each \$ _____

*Tape Cartridge
250MB _____ @ \$38.00/each \$ _____

525MB _____ @ \$45.00/each \$ _____

Other _____ @ Actual Cost \$ _____

Personnel Charges:

Personnel Charges _____ @ \$15.00/hour \$ _____

Programmer _____ @ \$26.00/hour \$ _____

Overhead Charges:

20% of Total
Programmer _____ x20% _____

Computer Resources Charges:

*Mainframe _____ @ \$10.00/min \$ _____

*Midrange _____ @ \$1.50/ min \$ _____

*Client/Server _____ @ \$2.20/ min \$ _____

*PC or LAN _____ @ \$1.00/min \$ _____

Postal/Shipping Charges: _____ @ Actual Cost \$ _____

Fax Charges:

*Local _____ @ \$0.10/page \$ _____

*Long Distance _____ @ \$0.50/page \$ _____

(Same area code)

*Long Distance _____ @ \$26.00/page \$ _____

(other area code)

Other Charges:

(Description: _____) _____ \$ _____

TOTAL CHARGES: _____ \$ _____

I am aware of the fees for obtaining the records I have requested, and understand that the district may require up to ten days to complete my request.

Signature: _____

Date: _____