



St. Augustine Beach Police Department



Public Records Request Invoice Form

Initial ten copies free of charge

Description	Quantity	Unit Cost	Total
Single-sided copies	___113___	\$0.15	
			___\$15.45___
Double-sided copies	_____	\$0.20	_____
Color copies (single-sided)	_____	\$0.20	_____
Color copies (double-sided)	_____	\$0.30	_____
DVD's (each)	_____	\$5.00	_____
Total Amount Due for copies: ___\$15.45___			

Total for Copies of documents only (additional charges for redactions)

Document Preparation

Number of Pages	Preparation Hours	Rate	Line Total
	3 (supervisor)	\$38.02/hr.	\$114.06
Total Amount Due:			\$114.06

Body Camera Redaction

Service Description	Quantity/Hours	Rate	Line Total
Review of Body-Worn Camera Video X 2		\$35/hr.	
Redaction of Body-Worn Camera Video		\$35/hr.	
Total Amount Due: N/A			

Total

Grand Total Amount Due: ___\$129.51___

Postage Due: _____

Please make payment to: St. Augustine Beach Police Department

Prepared by: ___T. Savage_____

ID: ___7253_____

Date: ___5/29/2025_____