

Benzonia Public Library
 PO Box 445
 Benzonia, MI 49616-0445
 231 -882-4111

REQUESTOR'S NAME AND ADDRESS:		
BILL CALCULATION		AMOUNT
LABOR: Searching for and locating the material: No. of Hours: X Wage Rate (including fringes) Reviewing the material, including separating exempt from non-exempt material: No. of Hours X Wage Rate (including fringes) Multiplier used to calculate fringe benefits (up to 50%) _____		\$
POSTAGE: (Actual Cost)		\$
DUPLICATING: Labor: No of Hours: _____ x Wage Rate (including fringes) Paper: No of Pages: _____ x Copying Rate \$.10 per page		\$
OTHER COSTS: Describe (e.g., Overtime, cost of duplicating to media other than paper)		\$
Make check (business/personal) or money order payable to Mail Check/Money Order to:		TOTAL
<div style="text-align: center;"> Benzonia Public Library PO Box 445 Benzonia, MI 49616-0445 Return a copy of this invoice with your payment </div>		\$
*PLEASE NOTE THAT IF A DEPOSIT IS REQUESTED (TOTAL IS GREATER THAN \$50.00), THE INDICATED AMOUNT IS AN ESTIMATE OF THE COST OF COMPLYING WITH YOUR REQUEST. THE ACTUAL COST MAY VARY FROM THIS AMOUNT.		DEPOSIT
For Internal Use Only		BALANCE TO BE PAID
REQUESTED INFORMATION TO BE: <input type="checkbox"/> Provided without charge <input type="checkbox"/> Mailed upon receipt of payment <input type="checkbox"/> Paid and picked up in person	Check / M.O. # From:	
Date Payment Received:	Date Documents Mailed:	Date Documents Picked Up: