

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Wells/FOIA	3-8-10

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 101378	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
<p>cc: Single for Stensland Cleared 3/23/10 e-mail response attached.</p> <p><input checked="" type="checkbox"/> FOIA DATE DUE 3-22-10</p> <p><input type="checkbox"/> Necessary Action</p>	

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

**Brenda James - SC Freedom of Information Act Request**

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**RECEIVED**

<b>From:</b>	"Geiger, Frank R" <Frank.R.Geiger@hud.gov>	<b>MAR 08 2010</b>
<b>To:</b>	"Kostbr@scdhhs.gov" <Kostbr@scdhhs.gov>	
<b>Date:</b>	3/8/2010 2:50 PM	
<b>Subject:</b>	SC Freedom of Information Act Request	Department of Health & Human Services OFFICE OF THE DIRECTOR

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I would like to be provided with the latest Operating Cost Data for Nursing Care Facilities operating in South Carolina. This data need not go back more than three years.

Frank R. Geiger

U. S. Department of HUD

Columbia MF Program Center

Fax: 803-253-3429

Phone: 803-765-5713

**From:** Bryan Kost  
**To:** Brenda James  
**Date:** 3/8/2010 3:05 PM  
**Subject:** Log letter -Fw: SC Freedom of Information Act Request  
**Attachments:** SC Freedom of Information Act Request

Jeff Saxon. Thanks!

**RECEIVED**

MAR 08 2010

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Doc 0378

**From:** Brandy Putnam  
**To:** Brenda James; Elizabeth Hutto; Karen Maine  
**Date:** 3/23/2010 7:37 AM  
**Subject:** FOIA Request #378

Sorry meant to send you this e-mail yesterday. The request is complete. The information was e-mailed to the requestor after further discussion of what he wanted.

I will bring the blue sheet back up to you today. No need to charge for it.

Thanks,  
Brandy

Brandy Putnam  
Department of Health and Human Services  
Phone Number (803)-898-1016  
Fax Number (803)-255-8228