

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Wells/FOIA</i>	DATE <i>10-21-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <p align="center">000218</p>	<input type="checkbox"/> I Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <p align="center"><i>CC: Singleton, Stensland Cleared 10/28/08, better attached.</i></p> 	<input type="checkbox"/> I Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> I FOIA DATE DUE <i>11-4-08</i> <input type="checkbox"/> Necessary Action

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

Law Office of W. Andrew Arnold

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712 East Washington Street

Greenville, SC 29601

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Fax (864) 242-4885

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Facsimile Transmittal Sheet

DATE: October 20, 2008

TO: Frank Adams

FAX #: 803-898-4515

FROM: W. Andrew Arnold

RE:

Number of pages including Transmittal Sheet: 2

MESSAGE:

The information contained in this facsimile transmission is confidential information and/or attorney work product for the exclusive use of the intended recipient listed above. Any reading, disclosure, use or reproduction of this communication, other than by the intended recipient, is prohibited. If you have received this in error, please notify us by collect telephone call immediately and return the communication to us by U.S. Mail.

Law Office of W. Andrew Arnold

Facsimile copy only

October 20, 2008

SENT VIA FACSIMILE 803-898-4515

Mr. Frank Adams
Director of Public Information
Department of Health and Human Services
Columbia, SC

**RE: Cost Reports for Laurel Hill Living Center
2006 and 2007**

Dear Mr. Adams:

By way of this letter and pursuant to the Freedom of Information Act, I am requesting the cost reports for Laurel Hill Living Center for the years 2006 and 2007.

If you have any questions regarding this request, please do not hesitate to contact me.

Sincerely,



W. Andrew Arnold

WAA/jdf



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

TO:
FROM:

SUBJECT: Cost of Processing FOIA Request #

The South Carolina Department of Health and Human Services has received and processed your FOIA request. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	_____ Hours	\$ _____
Pages copied at \$.10 per page	_____ Pages	\$ _____
Pages faxed at \$.20 per page	_____ Pages	\$ _____
Shipping and Handling Costs		\$ _____
Other costs associated with the FOIA request:	_____	\$ _____
Total Amount Due SCDHHS:		\$ _____

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

Please contact _____ should you have any questions.

Signature _____

Date: _____

Finance and Administration
P. O. Box 8206 Columbia South Carolina 29202-8206
(803) 898-2503 Fax (803) 255-8235



Log 2/18
✓

State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Fortner
Director

October 28, 2008

W. Andrew Arnold
Law Office of W. Andrew Arnold
712 East Washington Street
Greenville, SC 29601

Dear Mr. Arnold:

In response to your recent Freedom of Information Act request, enclosed you will find the information and the billing for processing your request from our office.

I hope this information is helpful to you. If you should have any questions, please contact Brandy Putnam at (803) 898-1040.

Sincerely,

A handwritten signature in cursive script that reads "William L. Wells".

William L. Wells, CPA
Deputy Director

WLW/bep

Enclosures



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Fortner
Director

October 28, 2008

TO: W. Andrew Arnold
Law Offices of W. Andrew Arnold

FROM: William L. Wells, CPA
Deputy Director

SUBJECT: Cost of Processing FOIA Request # 218

The South Carolina Department of Health and Human Services has received and processed your FOIA request. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	1	Hours	\$10.00
Pages copied at \$.10 per page	95	Pages	\$ 9.50
Pages faxed at \$.20 per page		Pages	\$ _____
Shipping and Handling Costs			\$ 4.50
Other costs associated with the FOIA request:			\$ _____
Total Amount Due SCDHHS:			<u>\$24.00</u>

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

Please contact Brandy Putnam at (803) 898-1040 should you have any questions.

Signature William L. Wells Date 10/28/08