

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Roberts/Hutto/FOIA</i>	DATE <i>5-7-13</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000345</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Cox,</i> <i>Cleared 5/9/13, letter attached</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE <i>5/21/13</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

a professional corporation

712 East Washington Street

Greenville, SC 29601

Telephone (864) 242-4800

Fax (864) 242-4885

aalawfirm.com

FACSIMILE TRANSMITTAL SHEET

DATE: May 2, 2013

TO: Frank Adams

FAX #: 803-898-4515

FROM: Jodie D. Fowler

RE:

RECEIVED

MAY 06 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

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.



May 2, 2013

SENT VIA FACSIMILE 803-898-4515

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

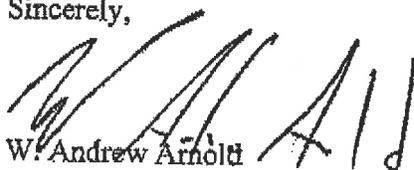
**RE: Cost Reports for Magnolia Place at Greenville located at 35 South Point Drive,
Greenville, SC 29607
For the year 2012**

Dear Mr. Adams:

By way of this letter and pursuant to the Freedom of Information Act, I am requesting the cost reports for Magnolia Place at Greenville located at 35 South Point Drive, Greenville, SC 29607 for the year 2012.

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

Sincerely,


W. Andrew Arnold

WAA/jdf



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:



May 9, 2013

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

Re: Cost Reports for Magnolia Place

Dear Mr. Arnold:

This is in response to your request for information from the South Carolina Department of Health and Human Services (DHHS) pursuant to the South Carolina Freedom of Information Act (FOIA) dated May 7, 2013 and received by DHHS on May 8, 2013. Enclosed is the cost report information that was requested.

Our expense for extracting this information is thirteen and 12/100 dollars (\$13.12). Please make the check payable to the Department of Health and Human Services and send it to:

Department of Health and Human Services
Department of Receivables
Post Office Box 8297
Columbia, SC 29202-8297

Thank you for your request. If you have any questions, you may contact Ms. Beth Hutto, Interim Deputy Director and Chief Financial Officer, at (803) 898-2955.

Sincerely,

Richard G. Hepfer
Deputy General Counsel

RGH/h

Enclosures

cc: Lynette Wilson, Receivables (w/o enclosures)