

Federal Bureau of Investigation Washington, D.C. 20535

## **Privacy Act Request**

The following information is necessary in order to file a Freedom of Information-Privacy Acts (FOIPA) request.

Full Name:		_
Aliases used:		_
		-
	Place of Birth:	- - <u></u>
Daytime Telephone Numbe		
Social Security Number (op	onal):	
assist the FBI in locating th	provide prior addresses, employments, etc., which you believe information you seek:	may -
Under penalty of per understand that any falsific United States Code (U.S.C.) of not more than five years,	ary, I hereby declare that I am the person named above and I ion of this statement is punishable under the provisions of Titl Section 1001 by a fine of not more than \$10,000 or by imprison r both; and that requesting or obtaining any record(s) under for the provisions of Title 5, U.S.C., Section 552a(i)(3) as a misde	nment false
Signature	Date	
Please note that mai	ddressed to the FBI is delayed several weeks due to increased secu	nrity

Please note that mail addressed to the FBI is delayed several weeks due to increased security procedures now in place.

A Legible and original signature is required.