

Date: _____

Requestor's Name:

Address:

Phone Number (including area code):

Fax Number (including area code):

E-mail (optional):

Subject (describe records you are requesting, include inclusive dates and or timeframe, as applicable):

In order to help determine status to assess fees, please select from the following:

- An individual seeking information for personal use.
- Affiliated with an educational or noncommercial institution, and this request is made for a scholarly purpose.
- Affiliated with a private corporation and seeking information for use in the company's business (commercial use)
- A representative of the news media and this request is made part of news gather and not for commercial use.

Enter Media Name: _____

Select type of Media:

- Newspaper
- Magazine
- Television
- Freelance
- Other _____

Purpose:

Willingness to pay Fees (enter amount you are willing to pay:

Explanation for consideration for a request of fee waiver:

Additional Comments (optional):

This form may not be used for Privacy Act Requests.