Federal Bureau of Investigation Record Information/Dissemination Section Service Request Unit, Room 6359 935 Pennsylvania Avenue, N.W. Washington, D.C. 20535

FBI Portland Suite 400, Crown Plaza Building 1500 Southwest 1st Avenue Portland, Oregon 97201-5828

## [Date]

## Attention:

This letter constitutes a request for records under the Freedom of Information Act, 5 U.S.C. § 552, and the Privacy Act, 5 U.S.C. § 552a, on behalf of [Full Name], [Address].

I request disclosure of all records that were prepared, received, transmitted, collected and/or maintained by the FBI, concerning me or my activities.

Full Name:

Aliases, or Previous Names:

Date of Birth:

Place of Birth:

Citizenship:

Current Address:

Incidents that may have drawn attention.

Further, I request disclosure of any records that were prepared, received, transmitted, collected and/or maintained by the FBI, relating to [Subject of Additional FOIA Request. Include sufficient detail or additional information to facilitate a reasonable search, and list multiple particular requests in different numbered sections].

## [Your Status – Choose One]

I am an individual seeking information for personal, non-commercial use. I understand that I may not be charged fees for the first two hours of search time, or for the first one hundred pages of duplication. 5 U.S.C. § 552(a)(4)(A)(iv)(II).

## [OR]

I am affiliated with an educational or noncommercial institution, and this request is made for scholarly purposes. I am entitled to a waiver of fees through my affiliation with [Name of Organization].

[OR]

I am a representative of the news media and this request is made part of a news gathering and not for commercial use. I am entitled to a waiver of fees through my affiliation with [Name of media].

The maximum amount I am willing to pay for processing of this request and copying fees is \$ .

If this request is denied in whole or in part, I request that you justify all deletions by reference to specific exemptions of the FOIA. Please provide all segregable portions of otherwise exempt material. I reserve the right to appeal a decision to withhold any information or to deny a waiver of fees.

Further, pursuant to 5 U.S.C. § 552a(b), I authorize the U.S. Department of Justice to release any and all information relating to me to: [Print full name of anyone would like to authorize request personal information about yourself]

[Have it Notarized]

OR

**State:** "Under penalty of perjury, I hereby declare that I am the person named above and I understand that any falsification of this statement is punishable under the provisions of Title 18, United States Code (U.S.C.), Section 1001 by a fine of not more than \$10,000 or by imprisonment of not more than five years, or both; and that requesting or obtaining any record(s) under false pretenses is punishable under the provisions of Title 5, U. S. C., Section 552a(i)(3) as a misdemeanor and by a fine of not more than \$5,000."

Executed on [Date],

[Signature]