

[ **Name of Person Making Request** (First, Last) ]  
[ **Street Address** ]  
[ **City, State, and Zip Code** ]  
[ **Telephone Number** ]  
[ **Email Address** ]

[ **Name of FOIA Coordinator** (if applicable) ]  
[ **Name of Agency or Organization** ]  
[ **Street Address** ]  
[ **City, State, and Zip Code** ]  
[ **FAX Number / Email Address** (for requests sent via FAX or email) ]  
[ **Date** ]

Request for Records Pursuant to the Freedom of Information Act

Dear Sir or Madam:

Pursuant to the Freedom of Information Act, 5 U.S.C. Section 552 et seq (“FOIA”), I hereby request that I be allowed access to, or in the alternative, copies (preferably electronic) of records that meet the following criteria, related to [ **Description of Records Requested** ].

If the agency decides to withhold any record(s) or redact any information from the record(s), please state the legal basis you assert for each such decision.

I agree to pay reasonable fees for the records, including actual costs up to [ **\$X** ]. Please contact me if I may assist your completion of this request.

Yours Sincerely,

[ **Signature of Requester** ]