

Privacy Act Information Request

National Security Agency
Attn: FOIA/PA Office (DJP4)
9800 Savage Road, Suite 6248
Ft. George G. Meade, MD 20755-6248

Full name:

Company/Organization:

Address

City:

State:

Zip Code:

Country:

Home Phone:

Work Phone:

SSN: (optional)

Description of the records being sought:

(see additional page if necessary)

_____ If there are any fees for searching for or copying the records, please let me know before you fill my request.

_____ You may also supply the records without informing me of the cost if the fees do not exceed \$, which I agree to pay. Please charge my _____ card # Expiration _____ or you may bill me via U.S. mail at the address I have provided.

If you deny all or any part of this request, please cite each specific exemption you think justifies your refusal to release the information and notify me of appeal procedures available under the law.

If you have any questions about handling this request, you may telephone me at _____ (day phone) or at _____ (evening phone).

Sincerely,