

FREEDOM OF INFORMATION ACT (FOIA) REQUEST (For use of this form, see AR 25-55. Proponent for this form is DHR.)		1. DATE:
PRIVACY ACT STATEMENT:		
AUTHORITY: 5 USC SECTION 552; PUBLIC LAW 106-544; EO 13392; AR 25-55; AR 340-21 PRINCIPAL PURPOSE(S): To provide another means for filing a request under the Freedom of Information Act and Privacy Act. ROUTINE USE(S): None. The "blanket routine uses" set forth at the beginning of the Army's Compilation of Systems of Record Notices also applies to this system. DISCLOSURE: Voluntary. However, failure to provide all required information could lead to rejection for inadequate data.		
SECTION I - REQUESTER INFORMATION		
2. NAME:	3. MAILING ADDRESS:	
4. TELEPHONE: <i>(Include area code)</i>		
5. E-MAIL ADDRESS: <i>Government e-mail addresses or equipment may not be used for FOIA requests</i>		
SECTION II - DESCRIPTION OF RECORDS		
6. DESCRIPTION: Describe the specific record(s) you seek with enough detail so the appropriate agency/activity may locate the record with a reasonable amount of effort. The detail should include the type of records or documents, description of the information sought, agency or unit in which record or documents may be located, dates or timeframe, and any unique identifying information such as a report or case number. The Freedom of Information Act (FOIA) is not an investigative arm, nor can it respond to a requestor's questions. The FOIA cannot create records to satisfy one's request. The FOIA only provides you the right to request federal government records from specific documents, records, and files of the federal government.		
SECTION III - INDIVIDUAL STATUS		
7. SELECT ONE OF THE REQUIRED ITEMS BELOW: In order to help determine my status to assess fees, you should know that I am: <ul style="list-style-type: none"> <input type="checkbox"/> An individual seeking information for personal use and not for commercial use. <input type="checkbox"/> A representative of the news media affiliated with _____ newspaper, magazine, television station, etc. <input type="checkbox"/> This request is made as part of news gathering and is not for commercial use. <input type="checkbox"/> Affiliated with an educational or non-commercial scientific institution. This request is made for a scholarly or scientific purpose and not for commercial use. <input type="checkbox"/> Affiliated with a private business and am seeking information for use in the company's business. 		
SECTION IV - FEE		
8. FEES: <input type="checkbox"/> I am willing to pay required fees authorized under the Freedom of Information Act upon request.		
SECTION V - CONTACT INFORMATION		
Please provide an original and legible signature. Legal representatives must present an original of proof of legal representation.		
9. This form can be mailed and/or e-mailed to: Administrative Services Division ATTN: Freedom of Information Act (FOIA) 18010 Legends Way Fort Cavazos, TX 76544 Email: USARMY.HOOD.USAG.MBX.DHR-FOIA@ARMY.MIL	10. NAME: <i>(Typed or handwritten)</i>	11. SIGNATURE AND DATE: