

REQUEST FOR INFORMATION  
PURSUANT TO FREEDOM OF INFORMATION ACT

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

A brief description of information desired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Search time estimate \_\_\_\_\_ hours

At \$ \_\_\_\_\_ per hour or fraction thereof \$ \_\_\_\_\_

Copies @ 10¢ per original page (double sided) \_\_\_\_\_

Other costs \_\_\_\_\_

Postage charges \_\_\_\_\_

Total estimated charges \_\_\_\_\_

I hereby desire a copy of the above information and agree to pay the charges for said information. I understand that the above is only an estimate of the charges for compilation of the information.

\_\_\_\_\_  
Requestor's Signature