

10- 347

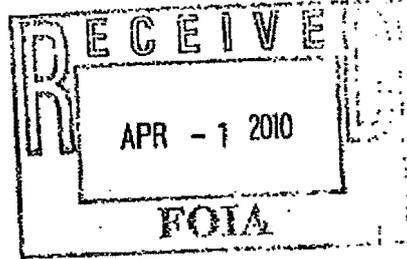
FOIA Request Order Form

Date: 04/01/2010
First Name*: Deborah
Last Name*: Carroll
Organization:
Address*: [Redacted]

City*: [Redacted]
State*: [Redacted]
Phone*: [Redacted] (Enter as 123-123-1234)
E-Mail:

- Category*:
 Animal Health
 Animal Welfare
 Financial
 Import/Exports
 Personnel
 Plant Protection and Quarantine
 Veterinary Services
 Wildlife Management
 Miscellaneous

Wen VS



APR 29 2010

Time Period (for requested records)
08/01/2009 09/01/2009

Description of information you are Requesting:

Request any and all backup health documentation issued in the UK (such as rabies certificate, fitness or fly, EU pet passport information...) for Airedale Terrier (microchip number 981000002621722) imported into the US into the State of Virginia between the above dates. Also, request any other related travel information and date of birth, origination point.

You MUST agree to pay applicable fees in order to process your FOIA request. Fees are charged in the amount of \$25.00 or more. A letter will be sent to you stating the exact amount of your fee.

Yes I agree to pay all applicable fees for this request.

* Mandatory Field

Submit Request