

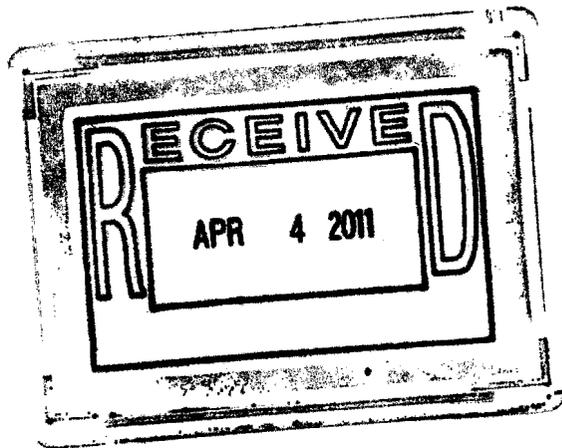
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FOIA Request Order Form

Date: 04/04/2011
First Name*: Jared
Last Name*: Maccleary
Organization: Crowell & Moring
Address*: 1001 Pennsylvania Ave.

City*: Washington
State*: DC Zip*: 20004
Phone*: 202-508-8954 (Enter as 123-123-1234)
E-Mail: jmaccleary@gmail.com
Category*:
 Animal Health
 Animal Welfare
 Financial
 Import/Exports
 Personnel
 Plant Protection and Quarantine
 Veterinary Services
 Wildlife Management
 Miscellaneous



APR 29 2011

Time Period (for requested records)

Description of Information you are Requesting:
APHIS BRS FOIA log for March 2011.

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