

Freedom of Information Act Request

TO: U.S. Army Crime Records Center
ATTN: FOIA/PA Division
27130 Telegraph Road
Quantico, VA 22134

Telephone: (855) 306-0003

Facsimile: (571) 305-4154

Email: usarmy.belvoir.usacidc.mbx.crcfoiapa@army.mil

I request ____/do not request ____ (initial one) a copy of the CID report for the Soldier listed below.

I am willing to accept the report on a CD ____ (initial one) I wish to receive the report in paper ____.

I wish to receive the report via email at _____.

Rank, Name of deceased Soldier

Unit

Social Security Number

Date of Birth

Location of Death

Name/relationship of the person requesting the report of investigation

Next of Kin address/Day time phone number

I understand that the information I have requested will be forwarded through my CAO for delivery to me unless I specify otherwise. I understand that my CAO will personally deliver _____ the sealed report to me.

My Cao is: _____

I do not want this report to be sent through my CAO to me. Send to the following address instead: _____

Signature

Date