

# Defense Intelligence Agency Privacy Act Request Form

Items marked with (\*) are required.

## Requester Information

Prefix: \* First Name: Middle Name: \* Last Name:

\* Street Address:

\* City: \* State: \* Zip code:

Phone Number: \* Email:

*Providing your birthdate and SSN is voluntary; however, without both, we may not be able to locate the records you are requesting.*

Social Security Number: Date of Birth:

## Privacy Act Request

*Please describe the records you seek, and provide any additional pertinent information*

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct and that I am the person named below. I understand that any falsification of this statement is punishable, under the provisions of 18 U.S.C. Section 1001, by a fine of not more than \$10,000, or by imprisonment of not more than five years, or both and that requesting or obtaining any record(s) under false pretenses is punishable under the provisions of 5 U.S.C. § 552a(i)(3) by a fine of not more than \$5000.

\_\_\_\_\_  
\*TYPED/PRINTED FULL NAME

\_\_\_\_\_  
\*SIGNATURE

\_\_\_\_\_  
\* DATE

*By signing above you affirm that you have filled out this form to the best of your ability and provided all known information that could aid in the search of the record(s) you have requested. Failure to provide all pertinent information could negatively impact the ability and time required to complete the request.*

## Defense Intelligence Agency Contact Information:

Mailing Address: Defense Intelligence Agency  
ATTN: IMO-2C (FOIA)  
7400 Pentagon  
Washington, DC 20301-7400

Email: FOIA1@dodis.mil  
Phone Number: (301) 394-6253