James Valvo

From: Sent: To: Subject: efoia@subscriptions.fbi.gov Tuesday, March 07, 2017 3:13 PM James Valvo eFOIA Request Received

Organization Representative Information

Organization Name Cause of Action Institute Prefix First Name James Middle Name [james.valvo@causeofaction.org Phone [____] Location United States] Last Name Valvo Suffix [] Email

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Domestic Address
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Address Line 1 1875 Eye Street NW Address Line 2 Suite 800 City Washington State District of Columbia Postal 20006 Agreement to Pay

How you will pay

I am requesting a fee waiver for my request and have reviewed the FOIA reference guide. If my fee waiver is denied, I would like to limit my request to the two free hours of searching and 100 duplicated pages.

Proof Of Affiliation for Fee Waiver

Waiver Explanation

See file previously attached.

Documentation Files Non-Individual FOIA Request

Request Information See attached file.