

Exhibit 3



704C East 13th Street, Suite 568
Whitefish, MT 59937
406-438-1918

FOIA Officer
Interior Business Center
US Department of the Interior
Submitted via Webform

October 2, 2017

FOIA REQUEST

Dear Records Request Officer:

Pursuant to the Freedom of Information Act, I request access to and copies of all AQD-91 forms submitted by Secretary Ryan Zinke or any other individual in the Immediate Office of the Secretary at any point since and including March 1, 2017. I have attached a copy of a blank AQD-91 Form to this letter to aid in identifying these records.

Fee Waiver Request

In accordance with 5 U.S.C. § 552(a)(4)(A)(iii), Western Values Project requests a waiver of fees associated with processing this request for records. The subject of this request concerns the operations of the federal government, and the disclosures will likely contribute to a better understanding of relevant government procedures by the public in a significant way. Moreover, the request is primarily and fundamentally for non-commercial purposes. 5 U.S.C. § 552(a)(4)(A)(iii).¹

Western Values Project requests a waiver of fees because disclosure of the requested information is “in the public interest because it is likely to contribute significantly to public understanding” of government operations and is not “primarily in the commercial interest of the requester.”² The disclosure of the information sought under this request will document and reveal the operations of the federal government, including how public funds are spent and how officials conduct the public’s business.

On September 28, 2017, it was reported that Interior Secretary Ryan Zinke “chartered a flight from Las Vegas to near his home in Montana this summer,” which “cost taxpayers

¹ See, e.g., *McClellan Ecological Seepage Situation v. Carlucci*, 835 F.2d 1282, 1285 (9th Cir. 1987).

² 5 U.S.C. § 552(a)(4)(A)(iii)

\$12,375.”³ This request seeks to identify any other instances in which Secretary Zinke has chartered private planes at taxpayer expense while serving at the Department of the Interior.

This request is primarily and fundamentally for non-commercial purposes. As a project of a 501(c)(3) organization, Western Values Project does not have a commercial purpose and the release of the information requested is not in Western Values Project’s financial interest. Western Values Project’s mission is to give a voice to Western values in the national conversation about resource development and public lands conservation, a space too often dominated by industry lobbyists and their government allies. Western Values Project will use the information gathered, and its analysis of it, to educate the public through reports, press releases, or other media. Western Values Project will also make materials it gathers available on our public website <http://www.westernvaluesproject.org/>.

Accordingly, Western Values Project qualifies for a fee waiver.

Conclusion

If possible, I would prefer to receive this information electronically via e-mail at csaeger@westernvaluesproject.org.

If you have questions or need additional information from me, please feel free to call me at (406) 438-1918.

If my request is denied in whole or part, I ask that you justify all deletions by reference to specific exemptions of the act. If any documents are withheld based on the Agency’s interpretation of any exemption, we request that you provide an index of those documents as required under *Vaughn v. Rosen*, 484 F.2d 820 (D.C. Cir. 1973), *cert. denied*, 415 U.S. 977 (1974). Specifically, this *Vaughn* index should describe withheld documents with enough specificity as to determine whether the material is exempt under the act and must describe each document or portion withheld.

Thank you for your assistance.

Sincerely,

Chris Saeger
Executive Director
Western Values Project

³ Drew Harwell and Lisa Rein, “Zinke took \$12,000 charter flight home in oil executive’s plane, documents show,” *Washington Post*, 09/28/17

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LOWER 48 - ORDER REQUEST FORM FOR GOVERNMENT FLIGHT SERVICES

This form should be submitted a minimum of ten (10) working days before the planned start date.
Detailed instructions are at the end of this document.

SECTION 1

NAME OF REQUESTOR	<input type="text"/>	CURRENT DATE	<input type="text"/>
EMAIL ADDRESS	<input type="text"/>	PHONE NUMBER	<input type="text"/>
AGENCY <input type="text"/>	UNIT <input type="text"/>	BILLEE CODE <input type="text"/>	PROJECT NAME <input type="text"/>

<https://www.doi.gov/aviation/aqd/ams>

REQUEST TYPE <input type="text"/>	Reason for Modification <input type="text"/>	Task Order # <input type="text"/>
CONTRACT TYPE <input type="text"/>	AQD Contracting Officer <input type="text"/>	

Provide a detail description of either the Mission Requirement, i.e., recon, point-to-point, RX Burn (describe units), resource survey, other special needs, etc. OR a complete Modification Justification with all the requested changes below.

- MISSION REQUIREMENT MODIFICATION JUSTIFICATION

AIRCRAFT REPORTING LOCATION	CITY <input type="text"/>	PERIOD OF PERFORMANCE FLIGHT DATES	START <input type="text"/>
	STATE <input type="text"/>		END <input type="text"/>

SECTION 2 Information below is provided from the Best Value Comparisons with the total estimated cost done on Pages 2/3.

Recommended Contractor <input type="text"/>	Contract/ARA # <input type="text"/>
Aircraft(s) Make/Model <input type="text"/>	Total Estimated Cost <input type="text"/>

SECTION 3

Funding Agency <input type="text"/>	Interagency Agreement # <input type="text"/>
DOI Bureau PR # <input type="text"/>	DOD MIPR# <input type="text"/>
Finance/Budget Officer Name & E-mail <input type="text"/>	Office of the Secretary (ONLY) Complete Cost Structure <input type="text"/>
Phone Number <input type="text"/>	AQD - Internal Use Only
Agency Tracking # (If applicable) <input type="text"/>	Treasury Acct. Symbol (TAS) <input type="text"/>
	Funding Agency ID <input type="text"/>
	Funding Office <input type="text"/>

SUBMIT COMPLETED FORM TO: AQD91@ibc.doi.gov (For Cross Servicing Orders, attach to PR in SAP)

AK/HI ORDER REQUEST FORM FOR GOVT FLIGHT SERVICES

This form should be submitted a minimum of ten (10) working days before the planned start date, it must route through both finance and contracting. Failure to fill out every block will result in delayed orders. Detailed instructions are at the end of this document.

SECTION 1

NAME OF REQUESTOR	<input type="text"/>	CURRENT DATE	<input type="text"/>
EMAIL ADDRESS	<input type="text"/>	PHONE NUMBER	<input type="text"/>
AGENCY <input type="text"/>	UNIT <input type="text"/>	BILLEE CODE <input type="text"/>	PROJECT NAME <input type="text"/>

For BILLEE Codes: <https://www.doi.gov/aviation/aqd/ams>

REQUEST TYPE <input type="text"/>	Reason for Modification <input type="text"/>	Task Order # <input type="text"/>
CONTRACT TYPE <input type="text"/>	AQD Contracting Officer <input type="text"/>	

Provide a detail description of either the Mission Requirement, i.e., recon, point-to-point, RX Burn (describe units), resource survey, other special needs, etc. OR a complete Modification Justification with all the requested changes below.

- MISSION REQUIREMENT
 MODIFICATION JUSTIFICATION

AIRCRAFT REPORTING LOCATION	CITY <input type="text"/>	PERIOD OF PERFORMANCE FLIGHT DATES	START <input type="text"/>
	STATE <input type="text"/> ZIP CODE <input type="text"/>		END <input type="text"/>

SECTION 2

Recommended Contractor

Total Estimated Cost Contract #

Aircraft(s) Make/Model	FAA Tail Number(s)	Inspection Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Pilot(s)	Inspection Expiration Date
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Above Aircraft/Pilot Information can be found on the Source List
https://www.doi.gov/aviation/aqd/aviation_resources

SECTION 3

Funding Agency

Interagency Agreement #

DOI Bureau PR #
Cross-Servicing (If Applicable)

DOD MIPR#

Finance/Budget Officer
Name & E-mail

Office of the
Secretary (ONLY)
Complete Cost
Structure

Phone Number

AQD - Internal Use Only			
Treasury Acct. Symbol (TAS)	<input type="text"/>	Funding Agency ID	<input type="text"/>
		Funding Office	<input type="text"/>

Agency Tracking #
(If applicable)

SUBMIT COMPLETED FORM TO: AQD91@ibc.doi.gov (For Cross Servicing Orders, attach to PR in SAP)

COST COMPARISON

CONTRACTOR #1

CONTRACT # **AIRCRAFT (Make & Model)**

ITEM DESCRIPTION	PAY ITEM	QUANTITY	RATE	COMMENTS	TOTAL
Daily Availability (If Applicable)	AV				\$ 0.00
Estimated Flight Time	-				\$ 0.00
Estimated Flight Time (If Applicable)	-				\$ 0.00
Guarantee Flight (If Applicable)	GTD				\$ 0.00
Fuel Vehicle Mileage	-				\$ 0.00
Additional Pay Items (list all that apply)	-				\$ 0.00
Pay Items are based on specific contracts	-				\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
				Total Estimated Cost	\$ 0.00

CONTRACTOR #2

CONTRACT # **AIRCRAFT (Make & Model)**

ITEM DESCRIPTION	PAY ITEM	QUANTITY	RATE	COMMENTS	TOTAL
Daily Availability (If Applicable)	AV				\$ 0.00
Estimated Flight Time	-				\$ 0.00
Estimated Flight Time (If Applicable)	-				\$ 0.00
Guarantee Flight (If Applicable)	GTD				\$ 0.00
Fuel Vehicle Mileage	-				\$ 0.00
Additional Pay Items (List all that apply)	-				\$ 0.00
Pay Items are based on specific contracts	-				\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
				Total Estimated Cost	\$ 0.00

COST COMPARISON

CONTRACTOR #3

CONTRACT # **AIRCRAFT (Make & Model)**

ITEM DESCRIPTION	PAY ITEM	QUANTITY	RATE	COMMENTS	TOTAL
Daily Availability (If Applicable)	AV				\$ 0.00
Estimated Flight Time	-				\$ 0.00
Estimated Flight Time (If Applicable)	-				\$ 0.00
Guarantee Flight (If Applicable)	GTD				\$ 0.00
Fuel Vehicle Mileage	-				\$ 0.00
Additional Pay Items (list all that apply)	-				\$ 0.00
Pay Items are based on specific contracts	-				\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
				Total Estimated Cost	\$ 0.00

JUSTIFICATION

Use the section below to justify the suggested vendor that is not the lowest price, i.e., vendor is unavailable to perform during the Period of Performance requested; vendor does not have the necessary equipment to provide the work, etc.