



Freedom of Information Act and Privacy Act Request Report

Must be completed if request cites "Freedom of Information Act," "FOIA," "5 U.S.C. 552," "Privacy Act" or "5 U.S.C. 552a".
(See exceptions in Instructions on reverse.)

1. Date Received (MM/DD/YYYY)	2. Act(s) Cited (Check one)		3. Date Due (MM/DD/YYYY)
	<input type="checkbox"/> FOIA (or Freedom of Information Act or 5 U.S.C. 552)	<input type="checkbox"/> Privacy Act (or 5 U.S.C. 552a) <input type="checkbox"/> FOIA/PA (both of the Acts)	

4. Date(s) Responded	Month	Day	Year	5. Expedited Processing (See instructions)	
	Completed Response	___/___/___	___		Was "expedited processing" requested? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Partial Response	___/___/___	___		Was "expedited processing" granted? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Partial Response	___/___/___	___		

6. First Party Requests	
a. Is the request for COPIES OF/ACCESS TO records about the requester?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Is the request for AMENDMENT of records about the requester?	<input type="checkbox"/> Yes <input type="checkbox"/> No

7a. Requester's Name (Last, First, MI)	7b. Requester's Organization (If applicable)
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7c. Name of Person on Whose Behalf Request Is Made (Last, First)

8. Description of Records Requested (If multiple types requested, describe up to three):

a. _____

b. _____

c. _____

If same records were previously requested by any other requester, enter a, b, c, as applicable: _____

9. Records Search (Indicate which apply to each record type (a), (b), and (c) above:		
(a) (b) (c)	(a) (b) (c)	(a) (b) (c)
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No records exist	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not an agency record	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Duplicate request
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Records were released in full	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Insufficient description	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other (Specify): _____
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Records were denied in part	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fee-related reason	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Records were denied in full	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Request withdrawn	

10. Denial Information (Complete if records are denied in full or in part) (See Instructions)

a. Authority Cited (Check one or more): ASM CFR FOIA Privacy Act

Section(s) Cited by Record Type in Item 8: (a) _____ (b) _____ (c) _____

b. Name of Person Responsible for the Denial (Last, First)	Title
City	State ZIP + 4

11. Resources Used (Beside each process, indicate time spent (in hours and/or quarter hours) by professional and/or clerical staff)

Example: If searching took 4 1/2 hours, enter 4 under Total Hours and check 30 minutes.	Professional Time				Clerical Time			
	Total Hours	15 Min.	30 Min.	45 Min.	Total Hours	15 Min.	30 Min.	45 Min.
Reading/Interpreting Request								
Searching for Responsive Records								
Reviewing Records for Release								
Writing Response Letter								
Reproducing or Printing Out Records								
Other (Specify)								

12. Accountability

a. Prepared By Name (Print) (Last, First)

b. Signature

c. Date

d. Office/Facility Name:

e. District and Area or HQ Organization

f. Telephone No. (w/ Area Code)

Instructions for Completing PS Form 8170

Must Be Completed For: Any written request for Postal Service records that cites in the letter or on the envelope the "Freedom of Information Act" (may instead refer to "the FOIA" or "5 U.S.C. 552") and/or the "Privacy Act" (may instead refer to "5 U.S.C. 552a"), with the following exceptions: requests (a) for customer name and address information pursuant to ASM 352.44; (b) from federal, state, or local government agencies; (c) from a union unless (1) the request cites the FOIA or Privacy Act and (2) when appropriate, includes the written consent of the records subject; (d) on preprinted Postal Service forms that reference the Privacy Act; (e) on preprinted forms from mortgage companies that reference the Privacy Act; and (f) requests that cite only the ASM or the Code of Federal Regulations (CFR) and do not cite the FOIA and/or Privacy Act.

1. **Date Received.** Enter the month, day, and year the request was received at the facility processing the request. This date is important because it begins the legal response time. Enter the date received at the facility, which may be different than the date received at the processing unit.
2. **Acts Cited.** Enter the Act(s) cited: Some requesters cite the Freedom of Information Act, some cite the Privacy Act, and some cite both Acts. Indicate the Act(s) cited in the request being processed. They may cite an Act in the body of the letter, in the address, or on the envelope.
3. **Date Due.** Enter the date a response is due. Compute this date by counting 20 *working* days from date of receipt of the request (Item 1).
4. **Date Responded.** Enter the month, day, and year of the response letter, i.e., the letter providing a determination on releasability of the records. (A letter asking for more time is **not** a response letter.) In order to avoid delays, an office may provide records as they become available, resulting in partial responses. Enter the partial response and completed response dates as appropriate.
5. **Expedited Processing.** Expediting processing does not mean merely that the requester asked that you quickly process the request. It is a formal process in which the requester asks to be granted "expedited processing" and shows an exceptional need or urgency for the records (See ASM 352).
6. **First Party Requests.** If the request is for records about the requester or if the requester is acting on behalf of the person to whom the requested records pertain, check "Yes" in item a. If the request is for amendment of records about the requester or if the requester is acting on behalf of the person to whom the amendment request pertains, check "Yes" in item b. Otherwise, check "No".
7. **Requester.** Enter the name of the requester (the individual's name appearing in the signature line). Enter the name as the requester states it. For example, if the requester's name is E. James Smith, Jr., E. is the first name, J. is the middle initial, and Smith, Jr. is the last name. If the request is from a law firm or business, enter the organization name. If the request is being made by a person or entity (law firm, union rep., relative) on behalf of another person *who has provided written consent*, enter the name of the person on whose behalf the request is made.
8. **Description of Records Requested.** Many requests are for various types of records. Categorize the records in up to three types. Include a description of each type using key words, e.g., Contract No. 104230-96-V-000 or "customer complaints about the closing of the Jefferson Post Office." **If personal records are requested, use general terms such as "Personnel" or "Medical." Do not include highly sensitive terms such as "EAP," "Psychiatric," etc.** Also check if the same records were previously requested by others for any of the records types described. The intent here is to identify any "popular" records. For example, a major construction project, a post office closing, or a violence-related incident may prompt multiple requests for records about the same subject. In such cases, the requests logically would be processed by the same office that would then have knowledge of other requests.
9. **Records Search.** Indicate the search status for each of the records types described in item 8 above. Check "no records exist" if a search located no responsive records; "records were released in full" if all records found were released, i.e., none were denied; "records were denied in part" if records found were released in part but denied in part; "records were denied in full" if all records found were denied; "not an agency record" if records requested/found do not constitute agency records; "insufficient description" if postal personnel familiar with the subject area cannot determine what records are being requested and must write to the requester for clarification; "fee-related reason" if response provides an estimate of fees or denies a fee waiver request; "request withdrawn" if the request is not processed because the requester withdrew it; "duplicate request" if the request is a duplicate of one being processed from the same requester; or "other" if situation is other than indicated above.
10. **Denial Information.** *Authority Cited:* You should be referencing the FOIA statute (5 U.S.C. 552), the Privacy Act (5 U.S.C. 552a) or implementing regulations at 39 CFR 265 or 266, or *Administrative Support Manual* 352 or 353, respectively, to ensure compliance with the various aspects of the law. Indicate which you are using. *Sections Cited:* If you denied records or parts of records, your letter must cite the reason(s) for the denial (specific section(s) of the regulations), e.g., ASM 352.42b; ASM 352.42b and 352.451. Indicate the section(s) cited for each record type described in item 8. Give the name and title or position of the Postal Service records custodian responsible for the denial.
11. **Resources Used.** Indicate the time, in total hours and quarter hour increments, as appropriate, spent completing each process/activity by clerical and/or professional staff. Under "Other" specify activities such as consultation with field counsel or Records office. For example, if a request gave an insufficient description and it took a professional staff person 15 minutes each to read the request and write the response letter, 15 min. would be checked under "Professional Time" for the activities of "reading/interpreting request" and "writing response letter." (**IMPORTANT!** *This tracks resources used to process the request and has no bearing on fees that may be assessed the requester.*)
12. **Accountability.** The person who completed the report **must** print his/her name; sign and date where indicated; and include their Office/Facility Name, District and Area or HQ Organization, along with a telephone number in case there are questions about the information given.

SEND A COPY TO YOUR RECORDS OFFICE COORDINATOR AS SHOWN BELOW. RECORDS OFFICE COORDINATORS ARE LOCATED IN THE FINANCE OFFICE OF EACH DISTRICT AND AREA CUSTOMER SERVICE OFFICE:

Records Custodians	Send Report to:
Area Offices	Records Office Coordinator in Area Office
Processing and Distribution Plant Offices	Records Office Coordinator in the Performance Cluster
Customer Service & Sales District Offices	Records Office Coordinator in the Performance Cluster
Postmasters	Records Office Coordinator in the Performance Cluster
Headquarters and Headquarters Field Units	Payroll Accounting/Records in Room 8800 at Headquarters



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4. Date(s) Responded Completed Response _____ / _____ / _____ Partial Response _____ / _____ / _____ Partial Response _____ / _____ / _____ Partial Response _____ / _____ / _____	5. Expedited Processing (See instructions) Was "expedited processing" requested? <input type="checkbox"/> Yes <input type="checkbox"/> No Was "expedited processing" granted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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6. First Party Requests a. Is the request for COPIES OF/ACCESS TO records about the requester? <input type="checkbox"/> Yes <input type="checkbox"/> No b. Is the request for AMENDMENT of records about the requester? <input type="checkbox"/> Yes <input type="checkbox"/> No
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7a. Requester's Name (Last, First, MI)	7b. Requester's Organization (If applicable)
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10. Denial Information (Complete if records are denied in full or in part) (See Instructions)

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