

To: FOIA / Privacy Act Officer
Agency: Central Office FOIA/Privacy Act Office
Department: **Department of Veterans Affairs**
FOIA Contact: **James P. Horan, Director FOIA**
Service (005RIC) Department of
Veterans Affairs 810 Vermont
Avenue, NW Washington, DC 20420
Phone: (202) 632-7233

Re: Name of Veteran: _____
VA Claim Number: _____
Social Security Number: _____ - _____ - _____

Dear Sir:

This is a request for documents under [38 U.S.C. §§ 5701\(b\)\(1\) and 5702](#); [38 C.F.R. §§ 1.525, 1.526, and 1.577 \(2011\)](#); and the Freedom of Information Act (FOIA), [5 U.S.C. § 552](#), on behalf of myself, (Name of Veteran Here) _____.

I hereby request a copy of all documents contained in my Veterans Affairs "claims folder", to include, but not limited to;

- all documents in the right flap,
- all documents in the left flap,
- all documents in the center flap,
- as well as any temporary files including post it notes or any paper clipped additions.

Please forward the copied documents directly to me at the following address:

[Veterans address here]

_____ (street address)

_____ (city)

_____ (state)

_____ (zip)

As provided in the FOIA, please respond to this request within **20 (twenty)** business-days.

I may be contacted at (Veterans Phone # here) (____) ____ - _____ if there are any questions.

Thank you for your assistance.

Sincerely,

(Veterans Signature Here) _____

Date Signed ____/____/____