

Freedom of Information Act Request Form

The following information is necessary in order to file a Freedom of Information Act request.

Full name: SHERMAN S STARTZ JR

Current Address:
550 LEBOW BLVD #34 BREMERTON WA. 98310

Email Address: SHELBYSTARTZ@OUTLOOK.COM

Daytime Telephone Number: 907-231-9270

Describe the specific record(s) you seek with enough detail so that a knowledgeable official of the activity may locate the record with a reasonable amount of effort. Please include date of incident, location of incident, report number, etc.

Requesting all investigative materials, communications, referrals, or findings related to the DoD OIG Hotline Complaint #20230213-083550. This includes records received from the DoD OIG, internal communications, investigation logs, outcome summaries, and any disciplinary or corrective action discussions. Please include a Vaughn Index if documents are withheld.

Note 1: Detail should include a description of the event on which you seek information, when the event occurred, etc. The more information provided, the better we will be able to locate the information you seek.

Note 2: The Freedom of Information Act is not an investigative arm, nor can it respond to requester's questions. The FOIA only provides you the right to request Federal Government records from specific documents, records and files of the Federal Government and after receipt of that information, you must then draw your own conclusions and take action as appropriate.

Select one of the items below (required). In order to help determine my status to assess fees, you should know that I am:

- ☐ a representative of the news media affiliated with
This request is made as part of a news gathering effort and not for commercial use.
- ☐ affiliated with an educational or noncommercial scientific institution. This request is made for a scholarly or scientific purpose and not for commercial use.
- ☒ an individual seeking information for personal use and not for commercial use.
- ☐ affiliated with a private corporation and am seeking information for use in the company's business.

FEE/WAIVER - Select one of the items below. You must indicate your willingness to pay all fees or those up to a specified amount or provide a justification to support a fee waiver. Agreements to pay fees are considered to be up to \$250, unless another amount is specified. Currently we charge for any appropriate combination of search, review and duplication costs.

- ☐ I am willing to pay fees for this request. If you estimate the fees will exceed \$
Please stop your work and advise me how much it will cost to process.
- ☒ I request a waiver of all fees for this request. Disclosure of the requested information to me is in the public interest because it is likely to contribute significantly to public understanding of the operations or activities of the government and is not primarily in my commercial interest.

FEE WAIVER JUSTIFICATION - If you requested a fee waiver, explain why it is justified. Note: Make sure you address each element of the U.S. Army's Fee Waiver Regulations. These regulations are in Title 32 of the Code of Federal Regulations in Section 518.19. **Click here** to view the regulation.

I am unable to pay any amount as a result of the negative impact this entire event has had on me financially

Thank you for considering my request.

Sincerely,

Signature Sherman Shelby Startz Jr Date 4-11-2025

A legible and original signature and a legible copy of a state or government-issued identification card is required. Legal representatives must additionally present an original of proof of legal representation.

Instructions: Fill out, print, sign and email this form, along with a legible copy of your state issued identification card or drivers license, or a federal agency issued ID to usarmy.belvoir.hqda-usacid.mbx.crcfoiapa@army.mil

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