FREEDOM OF INFORMATION ACT REQUEST

**Certified Mail/Confirmation of Delivery/Validation Notice # xxxx xxxx xxxx xxxx xxxx**

Your Name

Address

City, State ZIP

EXECUTIVE OFFICE OF THE UNITED STATES ATTORNEY’S

Freedom of Information Act/DC

600 East Street N.W.

Room 7300 Bicentennial Building

Washington, DC 20530

In Regards To: Freedom of Information Act Request Requested Documents: Oath of Office Certificate of Appointment of:

Employee(s) Name: Edward J. Tarver

Document Sought: Oath of Office for the years of specific date-specific date

Document Sought: Certificate of Appointment of U.S. Attorney Edward J. Tarver

TO WHOM IT MAY CONCERN:

Pursuant to the Freedom of Information Act Title 5 U.S.C. §552 et. seq., and the Privacy Act and Public Records laws under Title 5 U.S.C. §2906, the Undersigned request that your agency release and submit to me the following documents in the care, custody are requested under the names of specified government employees, officials, agents of the United Statas

Attorney’s Office located at 3540 Wheeler Road Suite 312, Augusta, GA 30909.

Please provide me the above requested documents within the thirty (30) days’ time period after receipt of this document/FOIA request, please waive any and all search time, fees for this request and note that the first one hundred pages are free.

Thank you in advance for your time and consideration in this matter.

This 10th day of July 2020

Sincerely Yours, dated: \_\_\_\_\_\_\_\_

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