FOIA

From: comment@bpa.gov

Sent: Thursday, August 15, 2013 1:45 PM

To: FOIA

Subject: FOIA Request from Chuck Johnson 2013-08-15T13:44:37

[Submitted by Anonymous User]

This message was created by a Microsoft InfoPath form. The form data may be included as an attachment.

Freedom of Information Act (FOIA) Request Form

To make an Electronic FOIA (E-FOIA) request, please provide the information below. Failure to enter accurate and complete information may render your FOIA request impossible to fulfill.

Requests submitted under the Privacy Act must be signed and, therefore, cannot be submitted on this form.

Name	Chuck Johnson	en en menter en weken wilder en komen en komen Ben en e	
Email	chuck@oregonpsr.org		
Organization	Physicians for Social Responsibility		
Mailing Address	812 SW Washington Street, Suite 1050		
City	Portland	1 1 2 2 W - 2 2 COMMON 12 2 COMMON 12 2 COMMON 12 2 COMMON 12 COMM	
State	OR Zip 9	7205	
Phone	503-777-6416		
FAX	Ex. xxx-xxx		
	Ex. xxx-xxx-xxxx		

Reasonably Describe Records

Describe the specific record(s) you seek with sufficient detail that a knowledgeable official of the activity may locate the record with a reasonable amount of effort. Such detail should include: dates, titles, file designations, and offices to be searched.

Since most DOE records are not retained permanently, the more information you provide, the better the opportunity there is to determine if the records involved still exist and where. The FOIA clearly states that records must exist at the time the request is submitted.

Enter description:

RECEIVED BY BPA FOIA OFFICE THAS DATE: 8/15/13 DUE DATE: 9/13/13 LOG # BM-2013-01495-F

Energy Northwest's fuel management plans for the Columbia Ge nerating Station submitted to the Bonneville Power Administrator per Contract #14-03-19121, Section 8 (a). We are interested in plans submitted from 2007 to present. Specify preferred form or format: Electronic
Type of Requester
Select a description of yourself and the purpose of the request to help determine your category for assessing fees:
OAn individual seeking information for personal use and not for commercial use.
• Affiliated with an educational or noncommercial scientific institution, and this request is made for scholarly or scientific purposes and not for commercial use.
OAffiliated with a private corporation and seeking information for the use in the company's business.
OA representative of the news media affiliated with
and the request is made as part of news gathering and not for commercial use.
Select Type of media: ONewspaper
OMagazine
OTelevision Station
Oother:
Fees and Fee Waivers
Your request must include a statement that (1) you agree to pay any fees that may be incurred to process the request, (2) stipulates an amount you are willing to pay, or (3) requests specific waiver or reduction of fees.
Please select the statement that applies:
OI agree to pay all applicable fees.
Ol agree to pay up to a specified amount for fees.
Enter amount \$0.00
OI request a waiver or reduction of fees.
If you request a waiver or reduction of fees, we will consider the following six factors to make a determination. Please provide information that addresses these factors:

The subject of the request: records concerns, "the open	Whether the subject of the requested ations or activities of the government."
	e information to be disclosed: Whether ontribute," to an understanding of ctivities.
subject likely to result from ability and intent to dissemi	rstanding by the general public of the disclosure, taking into account your nate the information to the public in a standing of the subject matter.
Whether the disclosure is li	tribution to public understanding: kely to contribute "significantly" to vernment operations or activities.
	de of a commercial interest: Whether ercial interest that would be furthered e, and, if so.
identified commercial interesting in comparison with the	losure: Whether the magnitude of the est of the requester is significantly ne public interest in disclosure, that he commercial interest of the
If my request for a waiver of	or reduction in fees is denied, I agree
to pay up to (enter amount) request.	to process my
Expedite	d Processing
equest expedited processing stification below. I believe a c pedited processing because	ompelling need exists to warrant
☐an imminent threat to the	e life or physical safety of an individual.
Federal Government activit	public concerning actual or alleged by (this option available ONLY for ed in disseminating information).
ease provide your specific ju	stification for expedited processing:
210	Enter the sum of the digits on the left into the box below. 3
	THE CONTROL OF THE CO