

Applicant's name	Reference n°
Address	Telephone number
Information requested	
<hr/> <hr/>	
Date first received	Date complete request received
Date completed	

**PROCESSING LOG**

Date	Action	Time spent	Responsible official (Name, title, address)	Comments

**FEES AND COSTS**

Fees assessed	\$			Costs	
Fees collected		Deposit required	\$ _____	Review	\$
Reproduction	\$			Consultation	\$
Searching	\$	Deposit paid	\$ _____	Translation	\$
Preparation	\$			Other	\$
Computer processing	\$			<b>TOTAL</b>	\$
<b>TOTAL</b>	\$	Balance paid	\$ _____	Officer person year	
Fees waived	\$			Support staff person year	
Fees reduced	\$				

**EXTENSIONS REASONS FOR EXTENSIONS**

Length of extension → \_\_\_\_\_

Consultation                     
  Searching                     
  Third party intervention

**AGENCY RESPONSE**

Excluded record                     
  Transferred                     
  Record does not exist  
 Insufficient information                     
  Unconfirmed                     
  All disclosed  
 Exempt under section → \_\_\_\_\_
  Severed under section → \_\_\_\_\_

**METHOD OF ACCESS TRANSLATIONS**

Copies                     
  Examination                     
 Translation requested into  English  French                     
 Translation prepared in (No. of days) → \_\_\_\_\_

**APPEALS**

To Information Commissioner (Date)	Reason for appeal
<hr/> <hr/>	
Recommendation by Information Commissioner	
<hr/>	
Date → _____	
Agency decision	
<hr/>	
Date → _____	
To Federal Court (Date) → _____	<input type="checkbox"/> By applicant <input type="checkbox"/> By third party <input type="checkbox"/> By Information Commissioner
Court decision	
<hr/>	
Date → _____	

