

BIENNIAL AGENCY REPORT

INSTRUCTIONS

The Identifying Information Law requires City agencies to submit comprehensive biennial agency reports related to their collection, retention, and disclosure of identifying information and their privacy protection practices.

To complete the 2024 biennial agency report:

- Review Form 2s (APO Designation of Collection and Disclosures as “Routine”) made since the 2022 compliance cycle;
- Review Form 5s (Agency Privacy Officer Approval of Collections and Disclosures on a “Non-Routine” Basis) made since the 2022 compliance cycle;
- Use Forms 2 & 5 to complete Worksheet 1 for all new and existing **collections** between 2022-2024;
- Use Forms 2 & 5 to complete Worksheet 2 for all new and existing **disclosures** between 2022-2024.
- Complete the Biennial Agency Workbook;
- Submit the biennial agency report by **July 31, 2024**.

Submit the biennial agency report to:

- Mayor at MOReports@cityhall.nyc.gov
- City Council Speaker at reports@council.nyc.gov
- Chief Privacy Officer and the Citywide Privacy Protection Committee at ojp@oti.nyc.gov
- Department of Records and Information Services (DORIS) online submission portal at <https://a860-gpp.nyc.gov>

THIS REPORT IS PUBLIC. PREPARERS SHOULD CONSULT AGENCY COUNSEL OR THE CHIEF PRIVACY OFFICER TO ENSURE THE RESPONSES ARE PROVIDED ACCORDING TO APPLICABLE LAW AND CITY POLICY.

VERSION CONTROL

Version	Description of Change	Approver	Date
4.0	New design for ease of use and technological enhancements, and miscellaneous clarifying revisions.	Michael Fitzpatrick Chief Privacy Officer, City of New York	April 2024
3.0	Updated completion date; miscellaneous clarifying revisions.	Aaron Friedman Principal Senior Counsel Office of Information Privacy	April 2022
2.0	Updated completion date; miscellaneous clarifying revisions.	Laura Negrón Chief Privacy Officer, City of New York	April 2020
1.0	First Version	Laura Negrón Chief Privacy Officer, City of New York	April 2018

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**BIENNIAL AGENCY REPORT
(Due on or before July 31, 2024)**

1. Agency: Office of the Chief Medical Examiner

2. APO Contact Details
 - a. Name: Vaughn Browne
 - b. Title: Agency Attorney
 - c. Email: vabrowne@ocme.nyc.gov
 - d. Telephone: 2123931904

COLLECTIONS

3. How many collections does the agency have to describe?
5

4. **COLLECTIONS.** Upload worksheet 1.



- Proceed to the next page -

5. For all **collections**, select the types of identifying information collected (check all that apply). See [Citywide Privacy Protection Policies and Protocols § 3.1](#).

<input type="checkbox"/> Name <input type="checkbox"/> Social security number (full or last 4 digits)* <input type="checkbox"/> Taxpayer ID number (full or last 4 digits)*	<u>Work-Related Information</u> <input type="checkbox"/> Employer information <input type="checkbox"/> Employment address
<u>Biometric Information</u> <input type="checkbox"/> Fingerprints <input type="checkbox"/> Photographs <input type="checkbox"/> Palm and handprints* <input type="checkbox"/> Retina and iris patterns* <input type="checkbox"/> Facial geometry* <input type="checkbox"/> Gait or movement patterns* <input type="checkbox"/> Voiceprints* <input type="checkbox"/> DNA sequences* <input type="checkbox"/> Height <input type="checkbox"/> Weight	<u>Government Program Information</u> <input type="checkbox"/> Any scheduled appointments with any employee, contractor, or subcontractor <input type="checkbox"/> Any scheduled court appearances <input type="checkbox"/> Eligibility for or receipt of public assistance or City services <input type="checkbox"/> Income tax information <input type="checkbox"/> Motor vehicle information
<u>Contact Information</u> <input type="checkbox"/> Current and/or previous home address <input type="checkbox"/> Email address <input type="checkbox"/> Phone number	<u>Law Enforcement Information</u> <input type="checkbox"/> Arrest record or criminal conviction <input type="checkbox"/> Date and/or time of release from custody of ACS, DOCS, or NYPD <input type="checkbox"/> Information obtained from any surveillance system operated by, for the benefit of, or at the direction of the NYPD
<u>Demographic Information</u> <input type="checkbox"/> Country of origin <input type="checkbox"/> Date of birth* <input type="checkbox"/> Gender identity <input type="checkbox"/> Languages spoken <input type="checkbox"/> Marital or partnership status <input type="checkbox"/> Nationality <input type="checkbox"/> Race <input type="checkbox"/> Religion <input type="checkbox"/> Sexual orientation	<u>Technology-Related Information</u> <input type="checkbox"/> Device identifier including media access control (MAC) address or Internet mobile equipment identity (IMEI)* <input type="checkbox"/> GPS-based location obtained or derived from a device that can be used to track or locate an individual* <input type="checkbox"/> Internet protocol (IP) address* <input type="checkbox"/> Social media account information
<u>Status information</u> <input type="checkbox"/> Citizenship or immigration status <input type="checkbox"/> Employment status <input type="checkbox"/> Status as a victim of domestic violence or sexual assault <input type="checkbox"/> Status as crime victim or witness	
<u>Other Types of Identifying Information</u> (list below): 	
<p>*Type of identifying information designated by the CPO (see CPO Policies & Protocols, §3.1.1).</p>	

DISCLOSURES

6. How many disclosures does the agency have to describe?

6

7. **DISCLOSURES.** Upload worksheet 2.



- Proceed to the next page -

8. For all **disclosures**, select the types of identifying information disclosed (check all that apply).
 See [Citywide Privacy Protection Policies and Protocols § 3.1](#).

<input checked="" type="checkbox"/> Name <input checked="" type="checkbox"/> Social security number (full or last 4 digits)* <input checked="" type="checkbox"/> Taxpayer ID number (full or last 4 digits)*	<u>Work-Related Information</u> <input checked="" type="checkbox"/> Employer information <input checked="" type="checkbox"/> Employment address
<u>Biometric Information</u> <input checked="" type="checkbox"/> Fingerprints <input checked="" type="checkbox"/> Photographs <input type="checkbox"/> Palm and handprints* <input type="checkbox"/> Retina and iris patterns* <input type="checkbox"/> Facial geometry* <input type="checkbox"/> Gait or movement patterns* <input type="checkbox"/> Voiceprints* <input checked="" type="checkbox"/> DNA sequences* <input checked="" type="checkbox"/> Height <input checked="" type="checkbox"/> Weight	<u>Government Program Information</u> <input type="checkbox"/> Any scheduled appointments with any employee, contractor, or subcontractor <input checked="" type="checkbox"/> Any scheduled court appearances <input type="checkbox"/> Eligibility for or receipt of public assistance or City services <input type="checkbox"/> Income tax information <input type="checkbox"/> Motor vehicle information
<u>Contact Information</u> <input checked="" type="checkbox"/> Current and/or previous home address <input checked="" type="checkbox"/> Email address <input checked="" type="checkbox"/> Phone number	<u>Law Enforcement Information</u> <input checked="" type="checkbox"/> Arrest record or criminal conviction <input type="checkbox"/> Date and/or time of release from custody of ACS, DOCS, or NYPD <input type="checkbox"/> Information obtained from any surveillance system operated by, for the benefit of, or at the direction of the NYPD
<u>Demographic Information</u> <input checked="" type="checkbox"/> Country of origin <input checked="" type="checkbox"/> Date of birth* <input checked="" type="checkbox"/> Gender identity <input checked="" type="checkbox"/> Languages spoken <input checked="" type="checkbox"/> Marital or partnership status <input checked="" type="checkbox"/> Nationality <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Religion <input checked="" type="checkbox"/> Sexual orientation	<u>Technology-Related Information</u> <input type="checkbox"/> Device identifier including media access control (MAC) address or Internet mobile equipment identity (IMEI)* <input type="checkbox"/> GPS-based location obtained or derived from a device that can be used to track or locate an individual* <input type="checkbox"/> Internet protocol (IP) address* <input type="checkbox"/> Social media account information
<u>Status information</u> <input checked="" type="checkbox"/> Citizenship or immigration status <input checked="" type="checkbox"/> Employment status <input checked="" type="checkbox"/> Status as a victim of domestic violence or sexual assault <input checked="" type="checkbox"/> Status as crime victim or witness	
<u>Other Types of Identifying Information</u> (list below): •NYPD complaint number and Property Clerk number •Medical Examiner case number	
*Type of identifying information designated by the CPO (see CPO Policies & Protocols, §3.1.1).	

9. Separate from the Citywide Privacy Protection Policies and Protocols, what are the agency's policies regarding requests for disclosures from other City agencies, local public authorities or local public benefit corporations, and third parties? Please **summarize or upload a copy of the policy**. See *N.Y.C. Admin. Code § 23-1205(a)(1)(c)(1)*.
10. Which divisions of employees within the agency make disclosures of identifying information following the approval of the privacy officer? See *§ N.Y.C Admin. Code § 23-1205(a)(1)(c)(4)*.
11. Which categories of employees within the agency make disclosures of identifying information following the approval of the privacy officer? See *§ N.Y.C Admin. Code § 23-1205(a)(1)(c)(4)*.
12. Do any of the agency's policies address **access** to identifying information by employees, contractors, and subcontractors? See *§ N.Y.C. Admin Code § 23-1205(a)(4)*.
- Yes – **GO TO QUESTION 13**
- No – **GO TO QUESTION 16**
13. Do these policies state that **access** to identifying information must be necessary for the employees, contractors, and subcontractors to perform their duties? See *N.Y.C. Admin Code § 23-1205(a)(4)*.
- Yes – **GO TO QUESTION 14**
- No – **GO TO QUESTION 16**
14. Are these policies implemented so that **access** is limited to the greatest extent possible, but also furthers the purpose or mission of the agency?
- Yes – **GO TO QUESTION 15**
- No – **GO TO QUESTION 16**

15. Describe how **access** is limited to the greatest extent possible while furthering the purpose or mission of the agency.

16. **Summarize or upload** the agency's current policies for handling **proposals for disclosures to other** City agencies, local public authorities, or local public benefit corporations, and third parties. *See N.Y.C Admin Code § 23-1205(a)(1)(c)(2).*

17. **Summarize or upload** the agency's current policies regarding the classification of **disclosures** as necessitated by the existence of **exigent circumstances or as routine**. *See N.Y.C Admin Code § 23-1205(a)(1)(c)(3).*

18. Since 2022, has the agency **considered or implemented**, where applicable, policies that minimize the collection, retention, and disclosure of identifying information to the greatest extent possible while furthering the purpose or mission of the agency? *See N.Y.C Admin Code § 23-1205(a)(3).*

Yes – **GO TO QUESTION 19**

No – **GO TO QUESTION 20**

19. Summarize the policies that the agency has **considered or implemented** regarding data minimization for the collection, retention, and disclosure of identifying information. *See N.Y.C Admin Code § 23-1205(a)(4).*

20. Summarize the agency's use of agreements for any use or disclosure of identifying information. *See N.Y.C Admin Code § 23-1205 (a)(1)(d).*
21. Since 2022, describe the impact of the Identifying Information Law and any other local, state, or federal laws upon your agency's practices in relation to the collection, retention, and disclosure of identifying information (i.e., if such practices would differ in the absence of these laws). The impact can be positive or negative. *See N.Y.C Admin Code § 23-1205(a)(2).*
22. Describe how the current privacy policies and protocols issued by the Chief Privacy Officer, or the guidance issued by the Citywide Privacy Protection Committee affected your agency's practices in relation to the collection, retention, and disclosure of identifying information. The effects can be positive or negative. *See N.Y.C Admin Code § 23-1205(a)(2).*

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APPROVAL SIGNATURE FOR AGENCY REPORT

PREPARER OF AGENCY REPORT

Name: Vaughn Browne
Title: Agency Attorney
Email: vabrowne@ocme.nyc.gov
Phone: 2123931904

ELECTRONIC SIGNATURE OF AGENCY HEAD OR DESIGNEE REQUIRED BELOW

Name: Jason Graham
Title: Chief Medical Examiner
Email: jgraham@ocme.nyc.gov
Phone: 2124472321

Signature: *Jason Graham*
Jason Graham (Jul 31, 2024 08:44 EDT)

Date: 07/31/2024

Describe the following types of collections. *Note, you may have multiple collections of the same type.*

COLLECTIONS				
	Type of Collection	Describe the Specific Activity	Classification	Describe the agency purpose or mission served by this Collection.
1	Compliance	Identifying information relating to decedents for use in death investigations, autopsies, external examinations, outreach to decedents' next of kin, identification of human remains or missing persons, cremation applications, mortuary functions, standard agency operations, and legal matters.	Pre-approved as routine	<p>OCME, pursuant to City Charter § 557, serves public health and the criminal justice system through forensic science. Our independent investigations of deaths and analysis of evidence provide answers to families and communities during the most challenging of times.</p> <p>OCME collects and retains identifying information in the regular course of such mission-based sensitive and wide-ranging activities as conducting death scene investigations in public and private locations, performing autopsies and external examinations to determine cause and manner of death of individual decedents within OCME's jurisdiction, working closely with families and other representatives of decedents, performing the City's mortuary</p>

				<p>functions and processing cremation applications, interacting with stakeholders in law enforcement and the criminal justice system, testing DNA for criminal proceedings and to identify missing persons (including victims of the September 11, 2001 attacks on the World Trade Center), and emergency response preparations.</p> <p>Internally, OCME engages in standard necessary personnel functions and implements continuity of operations plans, which also require the collection and retention of identifying information.</p>
2	Law Enforcement	DNA and other forensic scientific data and analysis relating to criminal matters (suspect and evidence samples, including victim samples), identification of unidentified human remains or missing persons are collected for testing/analysis.	Pre-approved as routine	OCME, pursuant to City Charter § 557, serves public health and the criminal justice system through forensic science. Our independent investigations of deaths and analysis of evidence provide answers to families and communities during the most challenging of times.

				OCME collects and retains identifying information in the regular course of such mission-based sensitive and wide-ranging activities as conducting death scene investigations in public and private locations, performing autopsies and external examinations to determine cause and manner of death of individual decedents within OCME's jurisdiction, working closely with families and other representatives of decedents, interacting with stakeholders in law enforcement and the criminal justice system, testing DNA for criminal proceedings and to identify missing persons (including victims of the September 11, 2001 attacks on the World Trade Center), and emergency response preparations.
3	Human Resources and other Personnel Matters	Employee identifying information for personnel purposes, including compensation, time & leave, benefits, employee discipline, training, and recruitment, and	Pre-approved as routine	OCME engages in standard necessary personnel functions and implements continuity of operations plans, which also require the collection and

		for continuity of operations and legal matters.		retention of identifying information.
4	Procurement	Identifying information (e.g., name, tax ID) for vendors who provide goods or services to OCME is collected as part of the procurement process.	Pre-approved as routine	To fulfill its statutory mandate and mission, OCME contracts with vendors to obtain necessary goods and services, which requires the collection of identifying information.
5	Legal Matters or Proceeding	Identifying information for parties, witnesses, representatives and other stakeholders is collected in legal matters in which OCME is a party or otherwise involved.	Pre-approved as routine	In fulfilling its statutory mandate and mission, OCME necessarily participates in legal matters/proceedings (e.g., civil, criminal, administrative), which requires the collection of identifying information.
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	<i>Type of Collection</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Collection.</i>
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	<i>Type of Collection</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Collection.</i>
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Please add additional rows, if needed

Describe the following types of disclosures. *Note, you may have multiple disclosures of the same type.*

DISCLOSURES					
	<i>Type of Disclosure</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Disclosure.</i>	<i>Was this disclosure made pursuant to an external request?</i>
1	Compliance	Identifying information relating to decedents for use in death investigations, autopsies, external examinations, outreach to decedents' next of kin, identification of human remains or missing persons, cremation applications, mortuary functions, standard agency operations, and legal matters.	Pre-approved as routine	<p>OCME, pursuant to City Charter § 557, serves public health and the criminal justice system through forensic science. Our independent investigations of deaths and analysis of evidence provide answers to families and communities during the most challenging of times.</p> <p>OCME collects and disclose identifying information in the regular course of such mission-based sensitive and wide-ranging activities as conducting death scene investigations in public and private locations, performing autopsies and external examinations to determine cause and</p>	Yes

				<p>manner of death of individual decedents within OCME's jurisdiction, working closely with families and other representatives of decedents, performing the City's mortuary functions and processing cremation applications, interacting with stakeholders in law enforcement and the criminal justice system, testing DNA for criminal proceedings and to identify missing persons (including victims of the September 11, 2001 attacks on the World Trade Center), and emergency response preparations.</p> <p>Internally, OCME engages in standard necessary personnel functions and implements continuity of operations plans, which also require the collection, retention and</p>	
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				disclosure of identifying information.	
2	Law Enforcement	Identifying information Relating to cause and manner of death and to DNA and other forensic scientific testing and analysis are critical to criminal matters, and the disclosure of certain forms of such information is specifically contemplated in the NYS Executive Law, Article 49-B, and in City Charter § 557.	Pre-approved as routine	Among OCME's responsibilities and authorized functions under City Charter § 557 are the determination of cause and manner of death in specified categories of cases within the City of New York, performing the functions of the City mortuary, providing forensic and related testing and analysis, and approving requests for cremation of remains. OCME is also required to keep full and complete records of its activities.	Yes
3	Human Resources and other Personnel Matters	Sharing of employee identifying information for personnel purposes, including compensation, time & leave, benefits, employee discipline, training, and recruitment, and for continuity of operations and legal matters.	Pre-approved as routine	OCME's HR Department supports the agency's operating units in meeting the agency's objectives by providing a full range of HR services such as recruitment/onboarding, payroll and Citytime management, labor	Yes

				relations, performance management, professional development and employee discipline.	
4	Procurement	Identifying information (e.g., name, tax ID) for vendors who provide goods or services to OCME is collected as part of the procurement process.	Pre-approved as routine	To fulfill its statutory mandate and mission, OCME contracts with vendors to obtain necessary goods and services, which requires the collection and disclosure of identifying information (e.g., FOIL requests).	Yes
5	Legal Matters or Proceeding	Identifying information for parties, witnesses, representatives and other stakeholders is disclosed in legal matters in which OCME is a party or otherwise involved.	Pre-approved as routine	In fulfilling its statutory mandate and mission, OCME necessarily participates in legal matters/proceedings (e.g., civil, criminal, administrative), which requires the disclosure of identifying information.	Yes
6	Research	Entities conducting scientific research (e.g., drug overdose patterns & other medical trends) request access to decedents' identifying information.	Pre-approved as routine	Research and surveillance of disease and other medical trends contributes significant value to the public health of the community and falls within the purpose and mission of OCME	Yes

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	<i>Type of Disclosure</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Disclosure.</i>	<i>Was this disclosure made pursuant to an external request?</i>
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78	Choose an item.		Choose an item.		Choose an item.
	<i>Type of Disclosure</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Disclosure.</i>	<i>Was this disclosure made pursuant to an external request?</i>
79	Choose an item.	[free text]	Choose an item.	[free text]	Choose an item.
80	Choose an item.		Choose an item.		Choose an item.
81	Choose an item.		Choose an item.		Choose an item.
82	Choose an item.		Choose an item.		Choose an item.
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99	Choose an item.		Choose an item.		Choose an item.
100	Choose an item.		Choose an item.		Choose an item.

Please add additional rows, if needed

For each **disclosure**, select the type of entity **and** provide the name of the entity that received the identifying information.

	<i>Type of Entity</i>	<i>Name of Entity</i>
1	City Agency	District Attorney’s Offices (Manhattan, Kings, Bronx, Queens, and Richmond)
2	City Agency	NYC Law Department
3	City Agency	NYC Department of Investigation
4	City Agency	NYC Department of Health and Mental Hygiene
5	State Agency	Office of the New York State Attorney General
6	Federal Agency	United States District Attorney’s Offices (Southern District of NY and Eastern District of NY)
7	Law Firm	Various firms representing decedents’ next of kin and other stakeholders within the criminal justice system.
8	Other Nonprofit	Various nonprofits representing decedents’ next of kin and other stakeholders within the criminal justice system (e.g., Legal Aid Society).
9	Research Institution	Various institutions/agencies conducting scientific research and surveillance of diseases, substance abuse overdose patterns, and other medical trends.
10	City Agency	Other City agencies relating to employee matters, including compensation and discipline.
11	Choose an item.	
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24	Choose an item.	
25	Choose an item.	
26	Choose an item.	
27	Choose an item.	
	<i>Type of Entity</i>	<i>Name of Entity</i>
28	Choose an item.	[free text]
29	Choose an item.	
30	Choose an item.	
31	Choose an item.	
32	Choose an item.	
33	Choose an item.	
34	Choose an item.	
35	Choose an item.	
36	Choose an item.	
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56	Choose an item.	
	<i>Type of Entity</i>	<i>Name of Entity</i>
57	Choose an item.	[free text]
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	<i>Type of Entity</i>	<i>Name of Entity</i>
86	Choose an item.	[free text]
87	Choose an item.	
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100	Choose an item.	

Please add additional rows, if needed

OPTIONAL QUESTION: Using the table below, describe any proposals for disclosures of identifying information that your agency declined to approve.

	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
1	Choose an item.	[free text]	[free text]	[free text]
2	Choose an item.			
3	Choose an item.			
4	Choose an item.			
5	Choose an item.			
6	Choose an item.			
7	Choose an item.			
8	Choose an item.			
9	Choose an item.			
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25	Choose an item.			

	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
26	Choose an item.	[free text]	[free text]	[free text]
27	Choose an item.			
28	Choose an item.			
29	Choose an item.			
30	Choose an item.			
31	Choose an item.			
32	Choose an item.			
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49	Choose an item.			
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51	Choose an item.			
52	Choose an item.			
53	Choose an item.			

	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
54	Choose an item.	[free text]	[free text]	[free text]
55	Choose an item.			
56	Choose an item.			
57	Choose an item.			
58	Choose an item.			
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76	Choose an item.			
77	Choose an item.			
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81	Choose an item.			

	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
82	Choose an item.	[free text]	[free text]	[free text]
83	Choose an item.			
84	Choose an item.			
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100	Choose an item.			

Please add additional rows, if needed