

FEDERAL BUREAU OF INVESTIGATION
FOI/PA
DELETED PAGE INFORMATION SHEET
FOI/PA# 22-cv-2850

Total Deleted Page(s) = 1
Page 23 ~ Duplicate;

XXXXXXXXXXXXXXXXXXXXXXXXX
X Deleted Page(s) X
X No Duplication Fee X
X For this Page X
XXXXXXXXXXXXXXXXXXXXXXXXX

Biden-Harris Administration SF-86 Supplemental Questions

1. Please list names of all (a) corporations, firms, partnerships, or other business enterprises, (b) nonprofit organizations, (c) other institutions with which you are now, or during the past 10 years, have been affiliated as an officer, owner, director, trustee, or partner.
2. Have you or your spouse ever registered as an agent for, performed work for, received any payments from and/or made any payments to, any foreign government, foreign-headquartered business, or nonprofit organization with any foreign government ownership? If so, please detail.
3. List any professional licenses/memberships you currently hold or previously held, such as bar associations, medical license, real estate license, etc.
4. List any instances in which you have ever been disciplined or cited for a breach of ethics or unprofessional conduct by, or been the subject of a complaint to, any court, administrative agency, professional association, disciplinary committee, or other professional group.
5. Please list all of your interests in real property, including additional homes, vacation homes, rental properties, and interests in trusts that may hold property.
6. Has a tax lien or other collection procedure ever been instituted against you or your spouse by federal, state, or local authorities? If so, please detail.
7. Have you ever been convicted of a criminal violation of any Federal, state, county, or municipal law, regulation or ordinance (excluding traffic, parking, and speeding offenses if the fine for an individual offense was less than \$300 and the offense did not involve alcohol or drugs)? If so, please detail.
8. Has any firm, company, or other entity in which you served as an officer, director, or executive ever been convicted of a violation of any Federal, state, county, or municipal law, regulation, or ordinance while you were employed there, or subsequently convicted based on conduct that occurred while you were employed there? If so, please detail.
9. To your knowledge, have any formal complaints or claims of harassment, discrimination, or retaliation ever been made against you to an employer or any other entity with which you may have been affiliated (e.g., as a contractor, consultant, or volunteer)? If so, please detail.
10. To your knowledge, has any employee directly supervised by you been reprimanded, sanctioned, or otherwise disciplined for any claim of workplace misconduct that you (a) were in a position to prevent and did not (through action or inaction), or (b) failed to respond to with remedial action? If so, please detail.
11. Have you ever run for or been elected to political office, served as a treasurer on a political committee, or been identified in a public way with a particular

candidate? Please detail any complaints lodged against you in any such capacity with the Federal Election Commission or state or local election authorities.

12. Have you ever belonged to any social club or organization which currently restricts — or restricted at the time of your affiliation — membership on the basis of sex, race, color, religion, national origin, age, or handicap? If so, please detail, and indicate your efforts to change the restrictive policy.
13. Please identify any adults (18 years or older) currently living with you who are not members of your immediate family (e.g., roommates or household employees) and indicate whether they are U.S. citizens.
14. Do you pay appropriate taxes for any household or domestic employees?
15. Have you ever paid late or had lapses in payment of child support and/or alimony owed by you?
16. Is there anything in your personal life that could be used by someone to coerce or blackmail you or is there anything in your life that could cause an embarrassment to you or the President if publicly known?



UNITED STATES OFFICE OF PERSONNEL MANAGEMENT

MEMORANDUM OF UNDERSTANDING
between
U. S. OFFICE OF PERSONNEL MANAGEMENT
FEDERAL INVESTIGATIVE SERVICE
and
FEDERAL BUREAU OF INVESTIGATION
SECURITY DIVISION (FBI SECD)
for
ELECTRONIC DELIVERY (eDelivery)

I. PURPOSE

The purpose of this Memorandum of Understanding (MOU) is to formalize an agreement between Federal Bureau of Investigation (FBI) Security Division (SECD) and the U.S. Office of Personnel Management (OPM) Federal Investigative Services (FIS) regarding participation in eDelivery, which provides the electronic assembly and delivery of investigative case materials. FBI SECD will be using this eDelivery connection for the purpose of file release as the FBI is an Investigations Service Provider and conducts its own investigations. The language in this agreement is relevant to the investigative material (file releases) provided from OPM to FBI SECD, not the investigations conducted by FBI SECD. This MOU sets forth expectations and responsibilities for participation in this system.

II. BACKGROUND

- A. OPM FIS is committed to utilizing technological tools in order to expedite elements of background investigations conducted on individuals (employees or applicants) for federal employment, consultants, volunteers and/or contractor personnel, for national security purposes, and for the purpose of satisfying the requirements of Homeland Security Presidential Directive 12 (HSPD-12).
- B. Therefore, wherever possible and mutually beneficial, OPM FIS encourages user agencies to connect to its investigative applications/systems in order to meet the timeliness deadlines set forth in the Intelligence Reform and Terrorism Prevention Act of 2004. This MOU sets forth the basic principles and guidelines under which FBI SECD will connect to OPM FIS' applications/systems.
- C. eDelivery is the electronic assembly and delivery of investigative case materials from OPM FIS to the requesting agency. eDelivery will replace the current process of mailing investigative

case materials. It is the vision of OPM FIS to increase the timeliness, and efficiency of the investigative process through eDelivery.

III. AUTHORITY

- Executive Order (EO) 10450—Security Requirements for Government Employees
- EO 12968—Access to Classified Information
- EO 13467, Reforming Processes Related to Suitability for Government Employment, Fitness for Contractor Employees, and Eligibility for Access to Classified National Security Information
- Homeland Security Presidential Directive (HSPD-12) of August 2004
- The Clinger-Cohen Act of 1996
- The Government Paperwork Elimination Act of 1998
- The e-Government Act of 2002
- The Intelligence Reform and Terrorism Prevention Act of 2004
- The Atomic Energy Act of 1954, as amended
- Economy Act of 1932, 31 U.S.C. Section 1535
- Section 17.503 of the Federal Acquisition Regulation, the contracting official of FBI SECD makes Determinations and Findings (D&F); Section 204 of E Government Act of 2002 (44 U.S.C. 3501 note); and 40 U.S.C. 11318.
- 28 U.S.C. § 534, Acquisition, preservation, and exchange of identification records and information; appointment of officials.
- 42 U.S.C. § 14616, National Crime Prevention and Privacy Compact.

IV. RESPONSIBILITIES

OPM FIS Agrees to the Following:

- OPM will provide a Distributed Investigative File (DIF) validation process for FBI SECD prior to the full acceptance of eDelivery.

FBI SECD Agrees to the Following:

- FBI SECD will acquire Connect: Direct Secure +, Connect: Direct Select, or FTP+.
- FBI SECD will report adjudicative actions using the "On-line File Release Request" form.
- FBI SECD will destroy the DIF after eligibility has been rendered and/or the data is no longer needed.
- FBI SECD will not reproduce or distribute the DIF without the consent of OPM FIS.

V. eDELIVERY

eDelivery consists of three distinct aspects: the content, packaging, and delivery of investigative case material.

A. Content

The content of the eDelivery investigative case material file will be identical to the content of the current mailed hard copy version of the investigative case material.

B. Packaging of File Releases

eDelivery will package the contents of an investigative file in a 256-bit encrypted ZIP file known as a Distributed Investigative File (DIF). The DIF will serve as an electronic representation of the investigative file and will provide a graphic representation of the normally printed file as a Portable Document File (PDF).

C. Delivery

Investigative case material will be transferred to FBI SECD via a nightly batch file push from OPM's data center using Connect: Direct Secure + (or Select) containing:

- DIFs (ZIP files)
- An XML transfer manifest (see Appendix A) in a 256-bit encrypted ZIP file containing a list of all investigative case material included in the transfer, along with the following information:
 - Case number
 - Subject name
 - Subject SSN
 - Case file names
 - Case file passwords

VI. CJIS DATA IT SECURITY RESPONSIBILITY

OPM is designated as a Non-Criminal Justice Agency and has been informed by the Federal Bureau of Investigation (FBI) of the responsibility for ensuring that Criminal Justice Information System (CJIS) data is protected while in our custody within the OPM environment. Subsequently, all other Federal agencies that receive CJIS data (criminal history fingerprint results, arrest record information, or "No Record" information) or Criminal History Record Information (CHRI data), are mutually responsible as well for the protection of the data in accordance with Title 28, C.F.R., Part 20 and the *CJIS Security Policy*.

VIII. CUSTODY AND USE OF INVESTIGATIVE INFORMATION

- A. The investigative material provided to FBI SECD is the property of OPM and may be recalled by OPM at any time. The investigative information provided by OPM to FBI SECD is to be used for the sole purpose of evaluating qualifications, suitability, and loyalty to the United States Government and/or making a security clearance or access determination. Transfer of information from FBI SECD to another agency, or within the FBI SECD for any other purpose than which it was provided is not permitted without prior approval of OPM's Freedom of Information and Privacy Act office (FOI/PA). Release of OPM investigative material to the subject of the investigation may be made only by OPM or with OPM approval, and any request for release of it should be immediately referred to OPM FOI/PA. While OPM investigative material is retained by FBI SECD, it must be safeguarded in a manner that will prohibit its unauthorized disclosure. Review will be limited to those persons whose official duties require it to make informed suitability and security determinations and who have been subjected to the appropriate favorable personnel suitability and/or security determination based on a background investigation.
- B. Excerpts or summaries of the information developed in the OPM investigation provided to FBI SECD may be provided to the subject of investigation; however, as stated above, a complete copy of the report of investigation or any particular item within it cannot be released to the subject. FBI SECD may not release information that:
- contains a national security classification (Top Secret, Secret, Confidential), even if the subject already has a clearance;
 - would reveal the identity of a source granted confidentiality;
 - is sensitive or restricted medical information as denoted at 5 CFR 297.205;
 - is other agency information unless permission has been granted from the originating agency. This includes information originating with the Central Intelligence Agency (CIA) or the National Security Agency (NSA) or even referencing these agencies.
 - is law enforcement information containing specific restrictive language unless requested pursuant to section 9101 (b)(1) of title 5, U.S.C.;
 - is information concerning other persons (3rd party information);
 - is OPM test material that includes reference to actual scoring, rating, or examining criteria;
 - is the result of a Fingerprint Name Check Only; National Crime Information Center (NCIC) checks; and Interstate Identification Index (Triple I) searches;
 - would reveal FINCEN as the source of the information provided;
 - is otherwise exempt from release by the Privacy Act.
- C. FBI SECD can submit a specific request for a copy of a sanitized version of an OPM background investigation for their release to the subject. The request must state the file is needed for adjudicative purposes, provide identifying information for the subject, and contain the agency address where the file should be sent. The request can be sent to OPM at the following address:

Supervisory Government Information Specialist
Freedom of Information/Privacy Act office
PO Box 618
1137 Branchton Road
Boyers, PA 16018-0618

IX. EFFECTIVE DATE AND DURATION OF AGREEMENT

- A. This MOU will become effective upon the last date of signature. It shall remain in effect for five (5) years unless otherwise modified or terminated. Any party may withdraw upon 90 days written notification to the other. This MOU can be modified through mutual written agreement among the parties, and shall remain in effect until modified or terminated by either party, or as terminated for other reasons described in this MOU. Any changes to this MOU will be in writing, and will be published as an amendment to this MOU.
- B. Nothing in this MOU shall be interpreted as limiting, superseding or otherwise affecting either agency's normal operations or decisions in carrying out its statutory or regulatory duties. This MOU does not limit or restrict FBI SECD from participating in arrangements with other entities. This MOU does not itself authorize the expenditure or reimbursement of any funds. Nothing in this MOU obligates FBI SECD to expend appropriations or enter into any contract or other obligations.

X. RESOLUTION PROCESS

In the event of disagreement arising in the interpretation of the provisions of this MOU, or amendments and/or addenda thereto, that cannot be resolved at the operating level, the area(s) or disagreement shall be stated in writing by each party and presented to the other party for consideration. If agreement is not reached within 30 days, the parties shall forward the written presentation of the disagreement to the respective higher level officials for appropriate resolution.

XI. PRIVACY ACT

- A. The Privacy Act of 1974, 5 USC §552a, regulates the collection, maintenance, use, and dissemination of personal information in government records when that information is retrieved by the name or other personal identifier of the subject of record. The parties agree to comply with any applicable provisions of the Privacy Act. The parties acknowledge that failure to comply with such requirements may provide grounds for termination of this agreement. eDelivery data will be stored or retrieved by a personal identifier in a system of records subject to the Privacy Act. It is OPM's responsibility as the owner of the system of records to ensure that the requirements of the Privacy Act are complied with, including publication of an appropriate Privacy Act System of Records Notice in the Federal Register. Failure to publish

such a timely notice in the Federal Register shall be grounds to terminate this MOU.

- B. Based on the purpose of this MOU the parties agree that information which is exchanged that is source selection sensitive, proprietary, Personally Identifiable Information (PII) shall be protected in accordance with applicable statutes and directives. The parties agree to protect these communications and information from unauthorized disclosure. The parties agree that if personal information is collected and used in any manner that collection and use shall be only for the limited purposes set forth in this MOU.
- C. In accordance with Office of Management and Budget (OMB) Circular A-130, Management of Federal Information Resources, FBI SECD and OPM agree information in the Delivery package (DIP) covered by this MOU is considered "Information about Persons," defined as "information related to personnel and similar data." As such, the security categorization level of OPM's system is rated high, with the potential for a breach to cause severe impairment of missions, functions, image and reputation. Therefore, we recommend the same rating for the receiving agency, but ultimately understand that following the delivery of the data by OPM to the agency, the security categorization of the system receiving the data is to the receiving agency's discretion.
- D. If either of the parties experiences a loss of PII provided by OPM FIS under the terms of this agreement, they will follow the OMB loss reporting guidelines (OMB M-07-16, "Safeguarding Against and Responding to the Breach of Personally Identifiable Information") within one hour of discovering the incident. In addition, the party experiencing the loss of PII will notify the other party's IT Points of Contact named in this agreement.

XII. IT POINTS OF CONTACT

[REDACTED]
Executive Program Director
U.S. Office of Personnel Management
Federal Investigative Services
1137 Branchton Road
Boyers, PA 16018
Telephone Number: (724) 794-5612

b6 per DCSA

[REDACTED]
FBI Cross Domain Management Office Lead
Federal Bureau of Investigation
935 Pennsylvania AVE NW
Washington, DC 20535
Telephone Number: [REDACTED]

b6 -1
b7C -1
b7E -3

XIII. SIGNATURES


The undersigned agree to the terms and conditions of this MOU:

Federal Bureau of Investigation
Security Division

U.S. Office of Personnel Management
Federal Investigative Services

Laura A. Bucheit 9/8/16
(Signature) (Date)

Laura A. Bucheit
Assistant Director

 9/2/16
(Signature) (Date)

Lisa M. Loss
Deputy Associate Director, External Affairs

b6 per DCSA

Attached: Appendix A, The Transfer File Manifest XML File Layout

Appendix A – The Transfer Manifest XML File Layout

XML TAG	PARENT	DATA	DESCRIPTION
<?xml>	None		XML Header
<openclosings>	None		Case Element
<DIFCrosswalk>	<openclosings>		Agency = AgencyName, date = date processed yyyyymmdd
<caseInfo>	<DIFCrosswalk>		Case Information
<straggler>	<caseInfo>	Char(1)	Straggler flag
<medWarning>	<caseInfo>	Char(150)	Medical warning verbiage
<protectedSourceWarning>	<caseInfo>	Char(500)	Protected Source warning verbiage
<subjectName>	<caseInfo>	Char(8)	Subject Full Name 35 Characters
<subjectSSN>	<caseInfo>	Date	Subject Social Security Number 9 Characters
<fileName>	<caseInfo>	Char(20)	File Name CaseNumber + first 5 of LastName
<firstPassword>	<caseInfo>	Char(15)	CaseNumber + SubjectSSN



Federal Bureau of Investigation
Client Request Sheet



From: The White House
Office of White House Counsel

To: FBI, Security Division
Background Operations Security Section
Other Government Agency Background
Investigations Unit I

Return Completed BI To: Please select _____

1. Candidate Information

Title of Position Candidate is Being Considered for _____

☐ Presidential Appointment (PA)
☐ PA with Senate Confirmation

Candidate's Name (first, middle, last name) _____

Other Names Used (maiden name, nickname) _____

Social Security # _____

Date of Birth _____

Place of Birth _____

Permanent Address _____

Current Address (if different than permanent address) _____

Current Employer/Address _____

Candidate's Consent:

I hereby authorize the FBI to provide the information specified below to the White House.

Signature/Date

2. Request of FBI

Use of this form to request information developed by the FBI or contained in FBI files requires the candidate's consent. Exceptions will only be permitted as authorized by the Attorney General / Deputy Attorney General.

Request Date _____

☐ URGENT – 14 days

☐ EXPEDITE – 21 days

☐ STANDARD

Type of Investigation

☐ Full Field Investigation
☐ Level 1 (back to 18th birthday)
☐ Level 2 (back 15 years)
☐ Level 4 (back 5 years)
☐ Limited Update Investigation

Attachments Included

☐ SF-86 Date Certified _____
☐ SF-86 Supplement
☐ Release Forms
☐ Fingerprint Card – Hardcopy Forthcoming
☐ Fingerprint Card – Previously Conducted
☐ Other – (specify) _____

3. White House Certification

I certify, subject to 18 §U.S.C. 1001, that the above is sought for official purposes only and I understand that obtaining this information under false pretenses or any unauthorized disclose may be violation of the Privacy Act, 5 U.S.C. §522a.

Requestor's Name _____

Requestor's Signature/Date _____

This request has been reviewed and approved by the Office of White House Counsel

Approver's Name _____

Approver's Signature/Date _____

QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

UNITED STATES OF AMERICA AUTHORIZATION FOR RELEASE OF INFORMATION

Carefully read this authorization to release information about you, then sign and date it in ink.

I Authorize any investigator, special agent, or other duly accredited representative of the authorized Federal agency conducting my background investigation, reinvestigation, or ongoing evaluation (i.e. continuous evaluation) of my eligibility for access to classified information or, when applicable, eligibility to hold a national security sensitive position to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, credit bureaus, consumer reporting agencies, collection agencies, retail business establishments, or other sources of information. This information may include, but is not limited to current and historic academic, residential, achievement, performance, attendance, disciplinary, employment, criminal, financial, and credit information, and publicly available social media information. I authorize the Federal agency conducting my investigation, reinvestigation, or ongoing evaluation (i.e. continuous evaluation) of eligibility to disclose the record of investigation or ongoing evaluation to the requesting agency for the purpose of making a determination of suitability, or initial or continued eligibility for a national security position or eligibility for access to classified information.

I Understand that, for these purposes, publicly available social media information includes any electronic social media information that has been published or broadcast for public consumption, is available on request to the public, is accessible on-line to the public, is available to the public by subscription or purchase, or is otherwise lawfully accessible to the public. I further understand that this authorization does not require me to provide passwords; log into a private account; or take any action that would disclose non-publicly available social media information.

I Authorize the Social Security Administration (SSA) to verify my Social Security Number (to match my name, Social Security Number, and date of birth with information in SSA records and provide the results of the match) to the United States Office of Personnel Management (OPM) or other Federal agency requesting or conducting my investigation for the purposes outlined above. I authorize SSA to provide explanatory information to OPM, or to the other Federal agency requesting or conducting my investigation, in the event of a discrepancy.

I Understand that, for financial or lending institutions, medical institutions, hospitals, health care professionals, and other sources of information, separate specific releases may be needed, and I may be contacted for such releases at a later date.

I Authorize any investigator, special agent, or other duly accredited representative of the OPM, the Federal Bureau of Investigation, the Department of Defense, the Department of Homeland Security, the Office of the Director of National Intelligence, the Department of State, and any other authorized Federal agency, to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for assignment to, or retention in, a national security position, in accordance with 5 U.S.C. 9101. I understand that I may request a copy of such records as may be available to me under the law.

I Authorize custodians of records and other sources of information pertaining to me to release such information upon request of the investigator, special agent, or other duly accredited representative of any Federal agency authorized above regardless of any previous agreement to the contrary.

I Understand that the information released by records custodians and sources of information is for official use by the Federal Government only for the purposes provided in this Standard Form 86, and that it may be disclosed by the Government only as authorized by law.

I Authorize the information to be used to conduct officially sanctioned and approved personnel security-related studies and analyses, which will be maintained in accordance with the Privacy Act.

Photocopies of this authorization with my signature are valid. This authorization shall remain in effect so long as I occupy a national security sensitive position or require eligibility for access to classified information.

Signature (<i>Sign in ink</i>)		Full name (<i>Type or print legibly</i>)		Date signed (<i>mm/dd/yyyy</i>)
Other names used			Date of birth	Social Security Number
Current street address Apt. #	City (<i>Country</i>)	State	ZIP Code	Telephone number

Enter your Social Security Number before going to the next page



--

QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

UNITED STATES OF AMERICA AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION PURSUANT TO THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

If you answered "Yes" to Section 21 of the Standard Form 86 (SF-86), carefully read this authorization to release information about you, then sign and date it in ink.

This is an authorization for the investigator to ask your health practitioner(s) the questions below concerning your mental health consultations. The U.S. government recognizes the critical importance of mental health and advocates proactive management of mental health conditions to support the wellness and recovery of Federal employees and others. The government recognizes that mental health counseling and treatment may provide important support for those who have experienced traumatic events, as well as for those with other mental health conditions. While most individuals with mental health conditions do not present security risks, there may be times when such a condition can affect a person's eligibility for a security clearance. Seeking or receiving mental health care for personal wellness and recovery may contribute favorably to decisions about your eligibility. Your signature will allow the practitioner(s) to answer only those questions identified below.

Authorization

I am seeking assignment to or retention in a national security sensitive position. As part of the investigative process, I hereby authorize the investigator, special agent, or duly accredited representative of the authorized Federal agency conducting my background investigation, reinvestigation, or ongoing evaluation (i.e., continuous evaluation) of eligibility for access to classified information or eligibility to hold a national security sensitive position to request, and my health practitioner(s) to provide, the information requested below, relating to my mental health consultations.

In accordance with HIPAA, I understand that I have the right to revoke this authorization at any time by writing to my health care provider/entity. Revocation of this authorization is not effective until received by my health care provider/entity. I understand that I may revoke this authorization, except to the extent that action has already been taken based on this authorization. Further, I understand that this authorization is voluntary. My treatment, payment, enrollment in a health plan, or eligibility for benefits will not be conditioned upon my authorization of this disclosure.

I understand the information disclosed pursuant to this authorization for use by the Federal Government only for purposes provided in the Standard Form 86 will no longer be covered by the HIPAA Privacy Rule, and that the Federal Government may redisclose the information as authorized by law, subject to Privacy Act safeguards.

Photocopies of this authorization with my signature are valid. This authorization is valid for one (1) year from the date signed or upon termination of my affiliation with the Federal Government, whichever is sooner.

Signature (<i>Sign in ink</i>)		Full name (<i>Type or print legibly</i>)		Date signed (<i>mm/dd/yyyy</i>)
Other names used				Social Security Number
Current street address Apt. #	City (<i>Country</i>)	State	ZIP Code	Telephone number

For Use By Practitioner(s) Only

Does the person under investigation have a condition that could impair his or her judgment, reliability, or trustworthiness?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
If so, describe the nature of the condition and the extent and duration of the impairment or treatment.		
What is the prognosis?		
Dates of treatment?		
Signature (<i>Sign in ink</i>)	Practitioner name	Date signed (<i>mm/dd/yyyy</i>)

Enter your Social Security Number before going to the next page



--

**QUESTIONNAIRE FOR
NATIONAL SECURITY POSITIONS**

UNITED STATES OF AMERICA
FAIR CREDIT REPORTING DISCLOSURE AND AUTHORIZATION

Disclosure

One or more reports from consumer reporting agencies may be obtained for employment purposes pursuant to the Fair Credit Reporting Act, codified at 15 U.S.C. § 1681 et seq.

Purpose

The Federal government requires information from one or more consumer reporting agencies in order to obtain information in connection with a background investigation, reinvestigation, or ongoing evaluation (i.e. continuous evaluation) of eligibility for access to classified information, or when applicable, eligibility to hold a national security sensitive position. The information obtained may be disclosed to other Federal agencies for the above purposes in fulfillment of official responsibilities to the extent that such disclosure is permitted by law. Information from the consumer report will not be used in violation of any applicable Federal or state equal employment opportunity law or regulation.

Authorization

I hereby authorize any investigator, special agent, or other duly accredited representative of the authorized Federal agency conducting my initial background investigation, reinvestigation, or ongoing evaluation (i.e. continuous evaluation) of my eligibility for access to classified information, or when applicable, eligibility to hold a national security sensitive position to request, and any consumer reporting agency to provide, such reports for purposes described above.

Note: If you have a security freeze on your consumer or credit report file, we will not be able to access the information necessary to complete your investigation, which can adversely affect your eligibility for a national security position. To avoid such delays, you should expeditiously respond to any requests made to release the credit freeze for the purposes as described above.

Photocopies of this authorization with my signature are valid. This authorization shall remain in effect so long as I occupy a national security sensitive position or require eligibility for access to classified information.

Print Name	Social Security Number
Signature (<i>Sign in ink</i>)	Date signed (<i>mm/dd/yyyy</i>)

Enter your Social Security Number before going to the next page



--

MEMORANDUM OF UNDERSTANDING

Between the

DEPARTMENT OF JUSTICE

and the

PRESIDENT OF THE UNITED STATES

Regarding Name Checks and Background Investigations
Conducted by the Federal Bureau of Investigation

1. Purpose

This Memorandum of Understanding (MOU) replaces the previously executed MOU between the Department of Justice and the President-elect', to reflect changes in name checks and background investigations conducted by the Federal Bureau of Investigation (FBI). This MOU also updates titles, procedures, and responsibilities. This MOU covers the procedures for the President of the United States (President) to submit requests for name checks and background investigations, as well as the FBI's responsibilities in conducting the requested investigations, so that key Administration positions can be assumed without undue delay.

2. General

a. The FBI will conduct file reviews ("name checks"²) and background investigations³ at the request of the President or his designated representative, for applicants, employees, or any other persons who will perform services for, or receive an award or recognition from, the President (hereafter the individual who is the subject of a requested name check or background investigation shall be referred to as the "Appointee").

b. Name checks and background investigations shall be conducted only to ascertain facts and information relevant to the Appointee's: (1) suitability for Federal government employment or retention in such employment; (2) suitability to provide services to the

¹ Executed November 10, 2008.

² A name check consists of searching names that have been indexed as part of FBI criminal or national security investigations or as part of FBI background investigations. Additionally, a search of FBI electronic case files will also be conducted to determine whether the individual is or has been the subject of, or has been referenced in, an FBI investigation.

³ A background investigation may be a full-field background investigation ("Level 1," to the 18th birthday; "Level 2," 15-year scope; "Level 3," 10-year scope; or "Level 4," 5 year scope), a 5-year re-investigation, an expanded name check, a limited update, or a limited inquiry (such as follow-up inquiries conducted to resolve particular issues/questions).

FBI Name Checks and Background Investigations for the President of the United States

President as a contractor, volunteer, etc.; (3) trustworthiness for clearance to access information classified under the provisions of Executive Order 12958, as amended by Executive Order 13292, and Executive Order 12968 (or any successor Executive Orders) and their implementing directives; or (4) trustworthiness for access to locales in close proximity to or frequented by the President. The results of these name checks and background investigations will permit adjudication of the Appointee by the respective agency for appropriate clearance, to include access to Sensitive Compartmented Information (SCI).⁴

3. Procedures for Submitting Requests

- a. Requests for FBI background investigations and name checks of Appointees shall be made in writing by the President or an official who has been designated in writing to make such requests (Requesting Official). All requests made by the Requesting Official must be approved by the Counsel to the President or an official designated in writing to approve such requests (Approving Official). The Requesting Official and Approving Official may be the same individual, if he or she is appropriately designated by the Counsel to the President.
- b. The President or his designee will provide the FBI, via official correspondence, with the title(s), name(s), and specimen signature(s) of the person(s) designated to act as Requesting Official(s) and Approving Official(s), and will apprise the FBI by official correspondence of any changes in approval authority.
- c. All name check and background investigation requests must be on the request form provided by the FBI and must contain the original signature of the President or the Requesting Official. The Requesting Official must certify, subject to the criminal penalties for making a false statement, that information is sought only for official purposes. All requests must also contain the original signature of the Approving Official. In addition, requests must include the Appointee's signature.
- d. An updated consent is not required for follow-up inquiries that are reasonably viewed as within the ambit of a previously-provided consent (e.g., when the President asks the FBI to develop further matters raised in a report of background investigation to which the Appointee consented). Requests for supplemental inquiries made within 6 months of the date of the Appointee's signed consent, within 30 days of the FBI's final report, or while an Appointee's confirmation is pending will be presumed to be within the ambit of the original consent.
- e. The reason for each background investigation will be indicated with specificity (which may be accomplished by checking the appropriate boxes on the form), and if known, shall include the position for which the Appointee is being considered. No material changes will be made to the form's content or format without the written concurrence of the FBI.

⁴ Access to SCI is determined under the standards set forth in Director of National Intelligence (DNI) Intelligence Community Directive 704, and by any modifying policy memorandum or successor directive.

FBI Name Checks and Background Investigations for the President of the United States

f. Each request for a background investigation shall also include: (1) a completed Standard Form 86 (SF-86) (Questionnaire for National Security Positions); (2) a set of the Appointee's fingerprints either on a standard fingerprint card or electronically submitted; and (3) a statement signed by the Appointee acknowledging his or her consent to be investigated and acknowledging that facts or information gathered shall be retained consistent with the applicable FBI Privacy Act Records Systems Notices, Records Retention Plan, and Disposition Schedule.⁵

g. A signed consent is not required to accompany a name check request if the subject is an organization or institution rather than an individual person. Such name check requests do require the signatures of the Requesting and Approving Officials, however.

h. The FBI's points of contact for background investigations and for name check requests are the Special Inquiry and General Background Investigations Unit (SIGBIU) (202-324-2568) and the National Name Check Program Unit (NNCPU)(540-868-4962).

i. While a background investigation is pending, if the President or his designated representative determines that the Appointee is not to be employed or appointed, the President or his designated official will promptly notify the FBI so the investigation can be discontinued.

4. Reporting Investigation Results

a. Except as provided below, if during the course of the background investigation the FBI discovers any adverse or medical information bearing on the suitability or trustworthiness of the Appointee, the FBI will promptly inform the President or his designated representative.

b. Subject to the Federal Privacy Act of 1974, persons interviewed during these investigations may be assured that their identity will be kept confidential to the extent permitted by law.

c. The FBI generally does not continue to actively monitor an Appointee following the completion of its final background investigation report, and the President or his designated representative should submit a new request if updated information is desired. However, prior to an Appointee's assuming the nominated position or being adjudicated for the clearance for which the investigation was conducted, if the FBI becomes aware of new information that raises questions about the suitability or trustworthiness of an Appointee to perform services for the President, the FBI will so apprise the President or his designated representative as soon as possible.

d. If the FBI's investigation reveals a pending Federal civil or criminal investigation involving the Appointee, dissemination of any information relating to the pending investigation will be halted. The FBI General Counsel (or her designee) will consult with

⁵ See Section (e)(3) of the Federal Privacy Act of 1974.

FBI Name Checks and Background Investigations for the President of the United States

cognizant FBI Headquarters officials to determine what information can be disseminated without harming the pending investigation. The FBI General Counsel will refer the matter to the Deputy Attorney General (or his/her designee), who will determine what information will be disseminated to the President or his designee.

e. The FBI will furnish summary memoranda, investigative reports or supporting materials (hereafter collectively referred to as reports) containing the results of its investigations to the President or his designated representative and will retain records identifying the persons to whom such reports are furnished.

f. The Department of Justice (DOJ) and the FBI may consider a request from the President for a name check or background investigation without the consent of the Appointee if justified by extraordinary circumstances. Such circumstances shall be documented in writing from the President or his designee to the Deputy Attorney General and the FBI General Counsel and should explain why the Appointee's consent cannot be obtained or should not be sought.

5. Use and Maintenance of Investigative Reports

a. The President or his designated representative will ensure that access to FBI reports is restricted to persons directly involved in ensuring the safety and security of the President or in determining an Appointee's suitability for employment, appointment, recognition or trustworthiness for access to sensitive⁶ or classified information. The President or his designated representative may also afford access to these reports to the United States Secret Service or the Office of Security and Emergency Preparedness for the Executive Office of the President, or to the security office of the agency or department to which an Appointee is reporting, upon a determination that any such additional recipient has a legitimate need to know the information for the proper performance of official responsibilities and that any such disclosure is not otherwise precluded by applicable law.

b. The President or his designated representative shall maintain records identifying all persons receiving access to the reports, and such records shall be furnished to the FBI upon request. No person having access to the reports will reproduce or disseminate the reports except in accordance with procedures agreed to by the President or his designated representative and the Director of the FBI or the Director's designated representative.

c. The President or his designated representative shall not allow the Appointee or any person outside of the appointment, employment, security clearance, confirmation, Presidential recognition, or Presidential protection process access to the reports, copies of the reports, or any information derived from the reports. If it is necessary to discuss the contents of reports with the Appointee, the President or his designated representative will ensure that the confidentiality of the sources contained therein is protected. Any request by the Appointee for access to the reports will be referred to the FBI for processing in

⁶ Sensitive information includes law enforcement matters, personal information about individuals, privileged commercial or financial information, etc.

FBI Name Checks and Background Investigations for the President of the United States

accordance with both the Federal Privacy Act of 1974 and the Freedom of Information Act.

d. Information obtained during an investigation will be retained at FBI Headquarters and FBI field offices in accordance with the FBI's Privacy Act records systems notices, Records Retention Plan, and Disposition Schedule. Certain information relating to pending Federal civil or criminal matters may be disseminated on a need-to-know basis to other officials of the DOJ or other appropriate agency to which the DOJ refers the matter. No further dissemination shall be made of information obtained during any investigation conducted pursuant to this agreement, except as part of the investigation of a violation of law or as otherwise permitted or required by Federal statute, FBI/DOJ regulation or policy, or Presidential Directive or Executive Order.

e. No person employed by the President shall be given access to any sensitive or classified information or material until appropriate clearance has been granted.

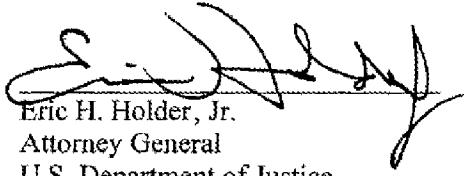
6. Effect of this Agreement

a. The procedures set forth in this MOU shall remain in effect until otherwise directed by the President consistent with applicable law. Any issues involving interpretation of these procedures will be resolved in accordance with applicable laws, rules, regulations, directives, and customary practices that may apply with regard to interpretation of Executive Branch documents.

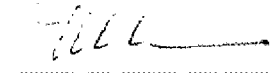
b. This MOU is not intended, and should not be construed, to create any right or benefit, substantive or procedural, enforceable at law or otherwise by any third party against any of the parties, their parent entities, the United States, or the officers, employees, agents, or other associated personnel thereof.

c. This MOU is not an obligation or commitment of funds, nor a basis for transfer of funds, but rather is a basic statement of the understanding between the parties of the matters described herein. Expenditures by each party will be subject to its budgetary processes and to the availability of funds and resources pursuant to applicable laws, regulations, and policies. The parties expressly acknowledge that the language in this MOU in no way implies that funds will be made available for such expenditures.

7. Signatures



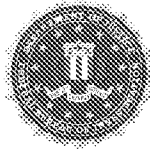
Eric H. Holder, Jr.
Attorney General
U.S. Department of Justice



Robert F. Bauer
Counsel to the President
The White House

Dated: 3/3/2010

Dated: 3-4-10



Background Investigation Request Form

From: The White House, Office of White House Counsel
To: Federal Bureau of Investigation, Security Division

Return to: _____

1. Candidate Information

Candidate's Name (first, middle, last name) _____

Other Names Used (birth, prior married, nickname) _____

Social Security Number _____

Date of Birth _____

Place of Birth _____

Permanent Address _____

Current Address (if different) _____

Phone Number _____

Email Address _____

Current Employer _____

Candidate's Consent: I hereby authorize the FBI to provide the information specified below to the Office of White House Counsel.

Signature/Date _____

2. Request of FBI

Use of this form to request information developed by the FBI or contained in FBI files requires the candidate's consent. Expectations will only be permitted as authorized by the Attorney General/Deputy Attorney General.

Request Date _____

Type of Investigation

- ☐ Full Field Investigation
☐ Level I (back to 18th birthday)
☐ Level II (back 15 years)
☐ Level IV (back 5 years)
☐ Periodic Reinvestigation
☐ Limited Update Investigation
☐ Limited Inquiry
☐ Other _____

Type of Position

- ☐ Executive - Cabinet-level Presidential Appointment with Senate Confirmation
☐ Executive - Presidential Appointment with Senate Confirmation
☐ Executive - Presidential Appointment (no confirmation needed)
☐ Judicial - U.S. Judge
☐ Judicial - U.S. Attorney
☐ Judicial - U.S. Marshal
☐ Other _____

Attachments Included

- ☐ SF-86 Date Certified _____
☐ SF-86 Supplement
☐ Release Forms
☐ Fingerprint Card – Hard Copy
☐ Fingerprint Card – Electronic
☐ Other _____

Title of Position Candidate is Being Considered for _____

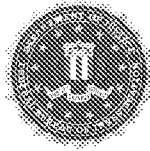
3. White House Certification

I certify, subject to 18 U.S.C. § 1001, that the above is sought for official purposes only and I understand that obtaining this information under false pretenses or any unauthorized disclosure may be a violation of the Privacy Act, 5 U.S.C. § 552a.

Requested by _____ Signature/Date _____

This request has been reviewed and approved by the Office of White House Counsel's Office.

Approved by _____ Signature/Date _____



Background Investigation Request Form

From: The White House, Office of White House Counsel
To: Federal Bureau of Investigation, Security Division

Return to: _____

1. Candidate Information

Candidate's Name (first, middle, last name) _____

Other Names Used (birth, prior married, nickname) _____

Social Security Number _____

Date of Birth _____

Place of Birth _____

Permanent Address _____

Current Address (if different) _____

Phone Number _____

Email Address _____

Current Employer _____

Candidate's Consent: I hereby authorize the FBI to provide the information specified below to the Office of White House Counsel.

Signature/Date _____

2. Request of FBI

Use of this form to request information developed by the FBI or contained in FBI files requires the candidate's consent. Expectations will only be permitted as authorized by the Attorney General/Deputy Attorney General.

Request Date _____

☐ **PRIORITY**
Only check for the utmost
priority cases.

Type of Investigation

- ☐ Full Field Investigation
☐ Level I (back to 18th birthday)
☐ Level II (back 15 years)
☐ Level IV (back 5 years)
☐ Periodic Reinvestigation
☐ Limited Update Investigation
☐ Limited Inquiry
☐ Other _____

Type of Position

- ☐ Executive - Cabinet-level Presidential Appointment with
Senate Confirmation
☐ Executive - Presidential Appointment with Senate Confirmation
☐ Executive - Presidential Appointment (no confirmation needed)
☐ Judicial - U.S. Judge
☐ Judicial - U.S. Attorney
☐ Judicial - U.S. Marshal
☐ Other _____

Attachments Included

- ☐ SF-86
☐ SF-86 Supplement
☐ Release Forms
☐ Fingerprint Card – Hard Copy
☐ Fingerprint Card – Electronic
☐ Other _____

Title of Position Candidate is Being Considered for _____

3. White House Certification

I certify, subject to 18 U.S.C. § 1001, that the above is sought for official purposes only and I understand that obtaining this information under false pretenses or any unauthorized disclosure may be a violation of the Privacy Act, 5 U.S.C. § 552a.

This request has been reviewed and approved by the Office of White House Counsel's Office.

Signature/Date _____