



UNITED STATES POSTAL INSPECTION SERVICE

OFFICE OF COUNSEL

A handwritten signature in black ink, appearing to be "M".

April 4, 2024

Mr. Evan L. Rees
MuckRock News, DEPT MR161322
263 Huntington Avenue
Boston, MA 02115-4577

RE: FOIA No. 2024-FPIS-00344

Dear Mr. Rees:

This is in reference to your letter dated April 4, 2024, requesting, pursuant to the Freedom of Information Act, access to certain records that may be in the custody of the U.S. Postal Inspection Service regarding you. Specifically, you request the following:

Evan L Rees, seeks access to documents related to covert surveillance programs, counterintelligence operations, and domestic intelligence activities conducted by this agency or it's contractors that may be synonymous with or reminiscent of tactics employed in historical programs such as COINTELPRO and MK Ultra. Specifically, this request aims to obtain records pertaining to activities that could be colloquially referred to as "ec or any other covert programs undertaken by the agency involving surveillance, infiltration, disruption, or manipulation of individuals or groups within the United States.

Documents of interest include, but are not limited to:

(Please process this request specifically for Evan L Rees, as the documents sought are requested in relation to myself.)

- 1. Internal memoranda, directives, and communications discussing the planning, execution, and objectives of such covert operations, including any references to MK Ultra or similar programs.*
- 2. Operational plans, strategies, and guidelines governing the conduct of surveillance and intelligence-gathering activities, including any involvement or coordination with community policing initiatives.*
- 3. Records of surveillance operations, including logs, reports, and warrants obtained for monitoring targeted individuals or groups, including any watch lists or databases used for tracking.*
- 4. Intelligence reports, assessments, and analyses generated as a result of surveillance and infiltration efforts, including any assessments related to private contractors involved in intelligence activities.*
- 5. Training materials, manuals, and protocols used to educate personnel involved in covert operations, including any materials related to community alerts or coordination with neighborhood watch groups.*
- 6. Budgetary documents related to the funding and allocation of resources for covert surveillance and intelligence activities.*
- 7. Legal opinions, guidance, and interpretations concerning the legality and oversight of covert programs.*

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8. *After-action reports, evaluations, and assessments conducted to review the effectiveness and impact of covert operations.*

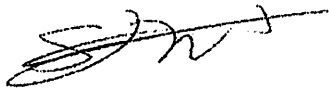
This request also encompasses documents related to activities synonymous with or related to "Cointelpro 2.0," including but not limited to covert surveillance programs, counterintelligence operations, undercover investigations, disruption programs, counterterrorism measures, covert infiltration tactics, political surveillance programs, coercive intelligence operations, and national security investigations.

In accordance with Handbook AS-353, Guide to Privacy and the Freedom of Information Act, Chapter 3-4.1a(1) states, "A records custodian may request that individuals provide either a notarized statement or a statement signed under penalty of perjury stating that they are the person they claim to be." The purpose of this solicitation is to ensure that the records of individuals who are the subject of U.S. Postal Inspection Service systems of records are not wrongfully disclosed by the Service. False information on this form may subject the requester to criminal penalties under Title 18, U.S.C., section 1001 and/or 5 U.S.C., section 552a(i)(3).

Using the enclosed form, please provide your **original** notarized signature. You may complete and submit an original signed declaration in lieu of a notarized signature. You must return your completed form **within 10 business days of the date of this letter**. Upon receipt of the requested information, we will provide further attention to your request for records. **Failure to furnish this information will result in your request being closed.**

Also, since your request letter does not indicate a willingness to pay fees, please note that under the FOIA, fees will be assessed if the cost to process your request exceeds \$25.00. You are further advised that pursuant to the schedule of fees contained in title 39, Code of Federal Regulations, part 265.9, that the FOIA allows for the first 100 pages to be provided to the requester at no charge. Thereafter, the reproduction cost involved in processing your request will be calculated at the rate of \$.15 per page.

Sincerely,



Anastasia Washington
FOIA Analyst

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CERTIFICATION OF IDENTITY

NOTARIZED SIGNATURE

Your signature: *[Signature]* 4/5/24
(To be signed in the presence of a Notary)

Subscribed and sworn to before me, this ____ day of _____, of the
year _____.

Signature of Notary: _____

Expiration Date of Commission: _____

Notary Seal or Stamp

DECLARATION

Full Name of Requester: *Evan L Rees*
(First, Middle, Last Name)

Date of Birth: 4/21/61 Social Security Number: 084-56-9465
(optional)

Current address: 28508 Coveridge Dr. Rancho Palos Verdes CA 90275

This declaration is submitted in lieu of my notarized signature pursuant to title 28, United States Code (U.S.C.), Section 1746.

I declare under penalty of perjury that the foregoing is true and correct, and that I am the person named above. I understand that any falsification of this statement is punishable under the provisions of title 18, U.S.C., Section 1001 by a fine of not more than \$10,000 or by imprisonment of not more than five years, or both; and that knowingly and willfully requesting or obtaining any record(s) concerning an individual under false pretense is punishable under the provisions of title 5, U.S.C., Section 552a(i)(3) as a misdemeanor and by a fine of not more than \$5,000.

(If you wish to consent to your information to be released to a third party, please designate below).

I hereby waive my right to privacy, and I authorize the USPIS to release any and all information relating to me to:

ATTORNEY OR OTHER DESIGNEE (Name, address and phone number)

Signature: _____ Date: _____

Corresponding FOIA No.: 2024-FPIS-00344