



SCHEDULE 2

FORMS

THE ACCESS TO INFORMATION ACT, 2005

THE ACCESS TO INFORMATION REGULATIONS, 2011

REQUEST FORM

(Please use a separate request form for each document requested)

1. Name of public body
(Please state the title of the institution from which you are requesting access to a record)

NATIONAL FORESTRY AUTHORITY
ATTN: EXECUTIVE DIRECTOR.

2. Name of requester
EDWARD RONALD SEKYEWA
HUB FOR INVESTIGATIVE MEDIA

3. Particulars of requester
(Please indicate the address to which correspondence related to your request should be sent)

Postal Address: P.O BOX 29285 KAMPALA

Physical address: TEACHERS' HOUSE

Plot No.: 28 - 30

Street: BOMBO ROAD

Town/City: KAMPALA

Telephone No.: 0775- 78 55 99

Fax No: -

Email address: edwardronalds16@gmail.com

Other: -

4. Description of record

(Please state all the information available to you which will assist in processing your request)

Name/Type of document

(If known)

IMPLEMENTATION OF THE NORTH RWENZORI C.F.R
MANAGEMENT PLAN

Reference/File No.

(If known)

5. Contents of document

(Give brief description)

A BREAKDOWN OF HOW THE US \$ 1.824 MILLION
WORLD BANK CREDIT WAS SPENT ON THE NORTH RWENZORI
CFR MANAGEMENT PLAN IN THE PERIOD BETWEEN
2010 TO 2012.

6. Other

(Please state any other details that may be relevant to the processing of the request)

7. I would like to:
(Please check the relevant options)

- (a) Inspect the record
- (b) Listen to the record
- (c) View the record
- (d) Have copies made available to me in the following format:-
 - i. Photocopy
 - ii. Compact disc
 - iii. Diskette
 - iv. USB mass drive
 - v. Transcript
 - vi. Other (please specify); and
- (e) Other (please specify)

8. Number of copies required: 1 COPY

9. Request on behalf of another person
.....
.....

Signature of requester: 

Date: 1st SEPTEMBER, 2013