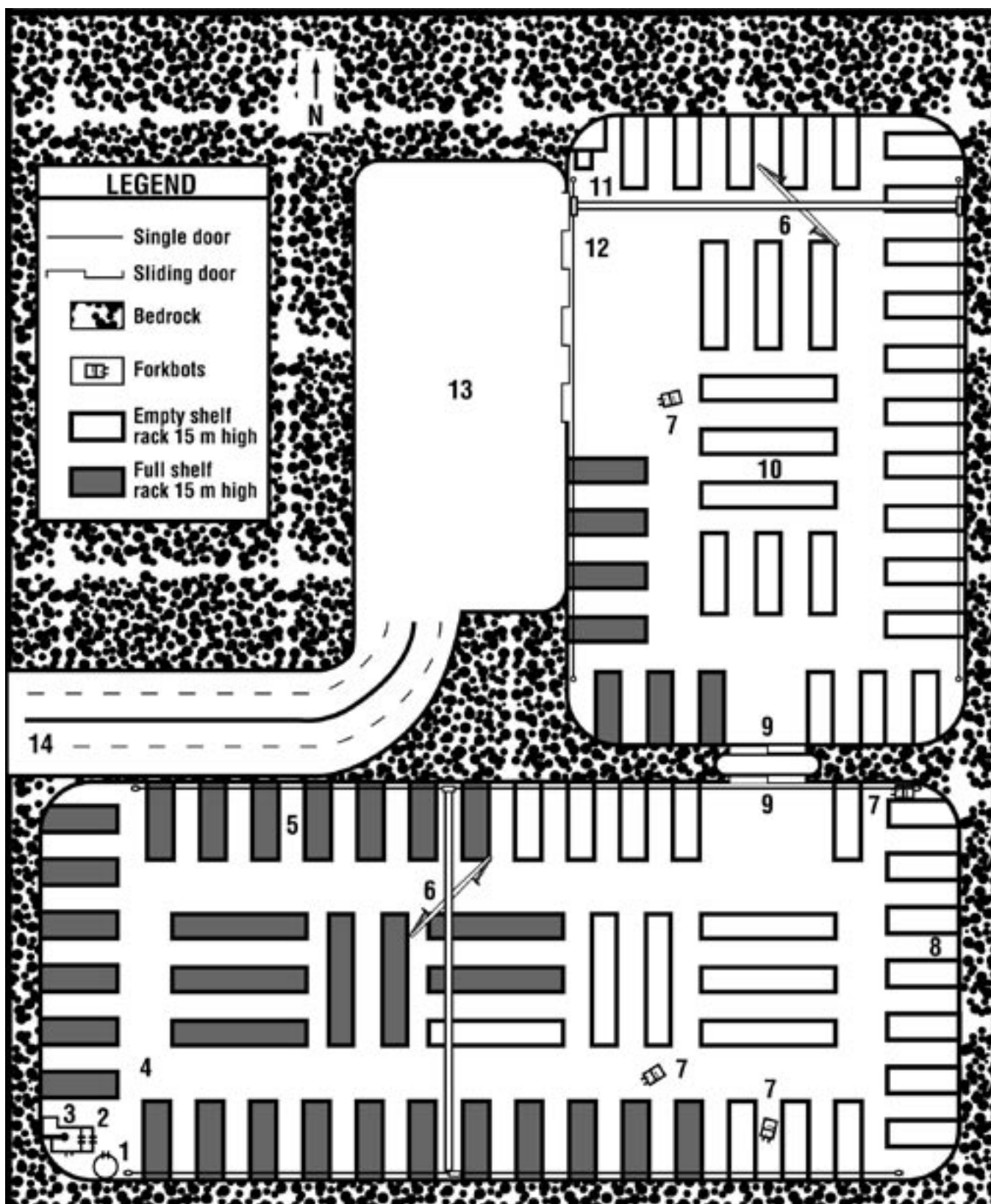:TITLE = VDSB MAP 1 / RSB LEVEL 54B, TRANSIT STORAGE AREA 12 [INACTIVE]
:TYPE = FLOOR PLAN / SCALE: 1 CM = 5 METERS
:CONFIGURATION = HARDCOPY PRINTOUT
:SOURCE = RSB.ARCHIVE.SUBSYSTEM
:SECURITY = ULTRAVIOLET. This information restricted. If your security clearance is below ULTRAVIOLET, report immediately to nearest termination center.

N

LEGEND

— Single door
⌐ Sliding door
Bedrock
Forkbots
Empty shelf rack 15 m high
Full shelf rack 15 m high

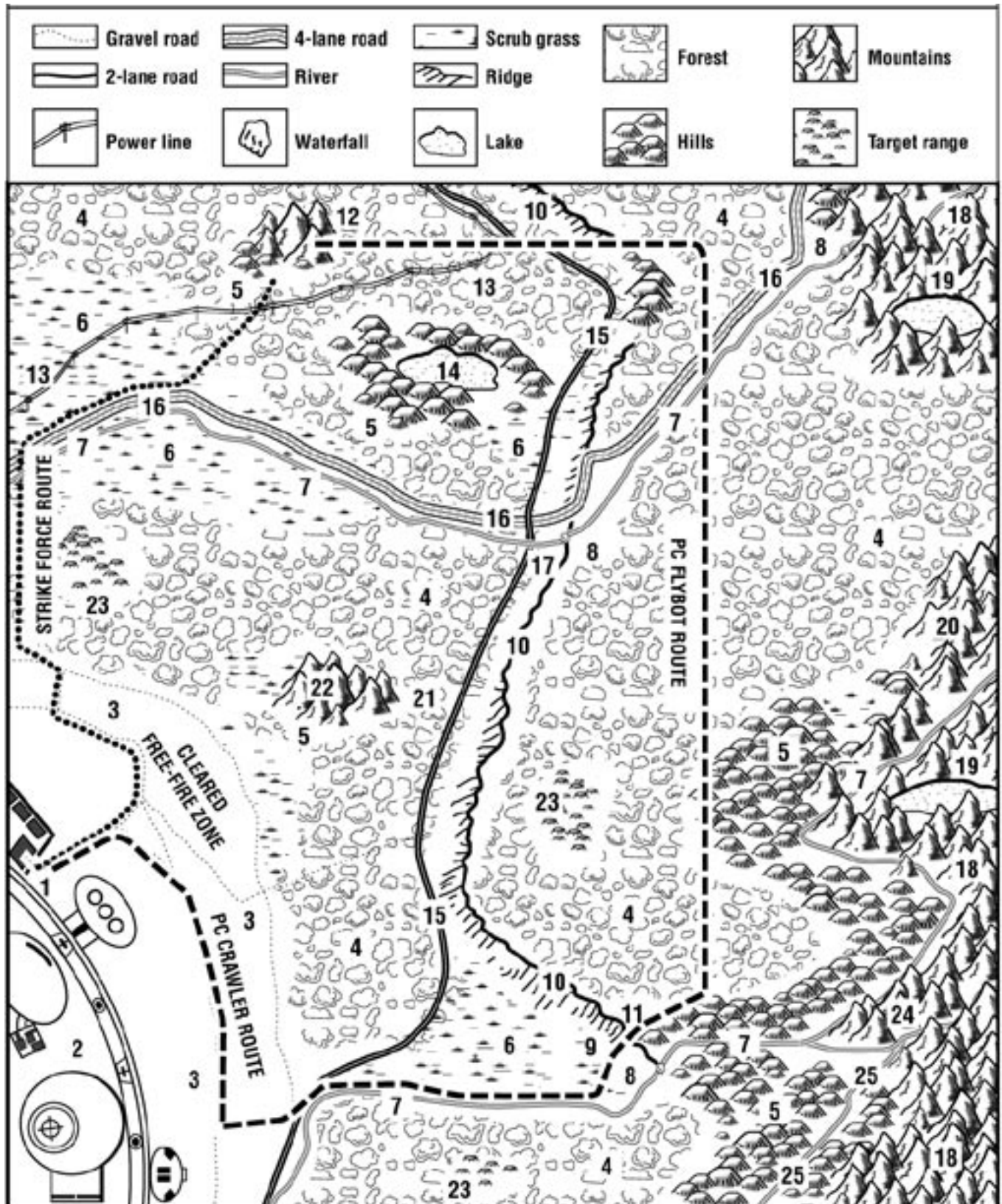11
12
6
7
13
10
9
9
14
5
6
8
4
3 2
1
7
7

:TITLE = VDSB MAP 2 / OUTDOORS, QUAD NE (ALTURAS OUTBACK)
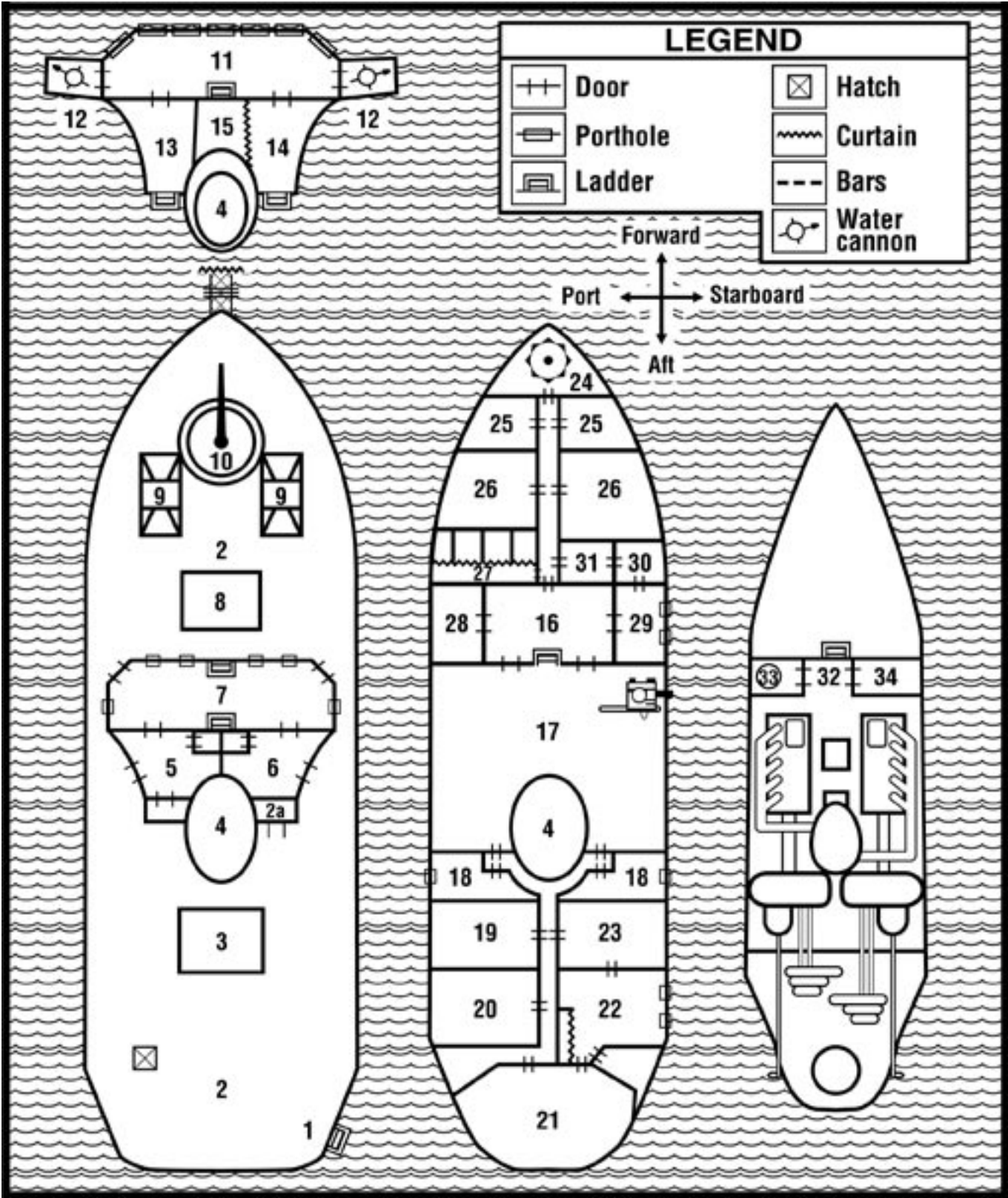:TYPE = TERRAIN FEATURE PROJECTION / SCALE: 1 CM = 1 KM / NORTH AT TOP
:CONFIGURATION = HARDCOPY PRINTOUT
:SOURCE = OUTPATROL.CARTOGRAPHY.SUBSYSTEM
:SECURITY = ULTRAVIOLET. This information restricted. If your security clearance is below ULTRAVIOLET, report immediately to nearest termination center.

:TITLE = VDSB MAP 3 / TJC RESERVOIR FIRE & RESCUE BOAT [INOPERABLE]
:TYPE = DECK PLAN / SCALE: 1 SQUARE = 1 METER / SQUARE GRID CURRENTLY UNAVAILABLE, CONTACT PLC
:CONFIGURATION = HARDCOPY PRINTOUT
:SOURCE = BUCK.U.MUSEUM.SUBSYSTEM
:SECURITY = ULTRAVIOLET. This information restricted. If your security clearance is below ULTRAVIOLET, report immediately to nearest termination center.

LEGEND

+++	Door	⊠	Hatch
▭	Porthole	∿∿∿	Curtain
▱	Ladder	- - -	Bars
⊙	Water cannon		

Forward
Port ← → Starboard
Aft

Information Inquiry Form 375A11/A00002-021

Distributed by the Office of Information Collection and the Office of Forms and Vouchers, PLC

Name _____**-**____**-**_____**-**_____

Service firm _____

Authorization _____

Are you now, or have you ever been a:

Communist?	☐	Yes	☐	No
Mutant?	☐	Yes	☐	No

   If yes: Reg. number _____, or ☐ Unregistered

Secret society member?   ☐ Yes   ☐ No

Information Access Method Preference
Please indicate the method by which you would prefer to access the information. (Note: Whereas we will endeavor to provide the information in the preferred way, this may not be possible.)

☐   Cmail direct AlphaNet link
☐   Cmail document in SecurePaq
☐   Send an x-copy of the document to selected confession booth
     State coordinates of preference: _____ Alternate: _____
☐   Send a datachip via homing dart
☐   Send via Fed-R-ALL Express Economy
     Preferred next of kin to receive document: _____
☐   Inspect original documented data item at local CPU Datacenter
     Indicate minimum monetary incentive provision: _____

The Computer is your friend. Are you The Computer's friend?
  ☐ Yes   ☐ No   ☐ Other (please explain) _____
_____
_____

Date info desired by_____ Date info needed by _____
2nd alternate date _____ 3rd alternate date _____
4th alternate date_____ 5th alternate date _____

I heard about the availability of this information from my
☐   Briefing officer (please state full name): _____
☐   Troubleshooter Headquarters mission dispatcher
     (full name and current sector assignment): _____
☐   Secret society contact (full name and society): _____
☐   Team leader (full name): _____
☐   Other:_____

CPU is open to feedback in respect of the handling of efficient and adequate information assessment, storage and dispersal. In requesting this information, do you feel that the data provided in your most recent briefing fell short of the optimum threshold required to complete your task in a satisfactory fashion?

☐ **No**, the information was entirely adequate, and my own shortcomings represent the primary driver behind this request

☐ **Yes** (to adequately handle your feedback and ensure timely processing, please explain in no fewer than 250 words; please be clear and concise; and do not repeat any individual word more than once)

_____
_____
_____
_____

INFORMATION NEEDED. *(Please be as specific as possible)*

Verification of requester's identity. Please apply four (4) distinctive forms of verifiable personal cellular material within the spaces provided below.

Purpose of information request (optional; though you are not required to state the purpose for your request, doing so may assist Internal Security in clearing temporary consideration for deliberation in respect of a registered application to acquire the participation of an executive deputy administrative officer to review your request):

_____
_____
_____
_____
_____
_____
_____

FOR OFFICIAL USE ONLY! DO NOT WRITE IN THE SPACE BELOW!

Attention Processors: To fulfill request for information, secure approval from ULTRAVIOLET-Clearance personnel in all service groups (initials or identitag below):

CPU _____	PS_____	IS _____	IS/InfCom ___
TS _____	AF_____	IS/Sup _____	IS/InOff _____
HPD&MC _____	PLC_____	IS/AssSup ___	IS/InOut ____

Result:
☐ Return for clarification   ☐ Information not found
☐ Requestor terminated
☐ Request filed (state reason on attached sheet and submit to IntSec)
☐ Information unavailable at this security clearance
☐ Please have a(n) IntSec officer/Vulture Squadron/brainscrub specialist (delete as applicable) contact me

Signature _____ **Date** _____

Witness #1 _____ **Date** _____

Witness #2 _____ **Date** _____

Bot Witness #1 _____ **Date** _____

Counter-signature _____ **Date** _____