Political Archive Supplementary Opinion

Application nur	mber: / Case N	No:	(to be filled in by the NAA)	
Applicant	☐ Party to the subject matter ☐ Heir			
	Full name of the party			
	to the subject matter of			
Archive	the archive			
under	Name of the fonds			
application	(agency)			
	File number	(Year number / Classification nu	umber / Folder number)	
The applicant agrees to abide by the provisions of Point 2 and Point 8 of these				
Directions in stating the supplementary opinion herebelow, which shall be made				
publicly available for viewing, hand-copying, or duplication.				
Signature of applicant:				
Supplementary opinion				
(If there is not enough space below to write out the entire opinion, please continue on a separate sheet.)				

Supplementary opinion, continued (If there is not enough space below to write out the entire			
opinion, please continue on a separate sheet.)			