

U.S. Army Corps of Engineers • Buffalo District

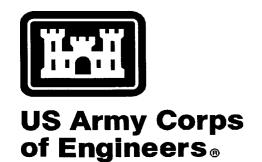
Please Print Clearly Name Representing			Address	City/State/Zip Code	E-mail address	Would you like to be added to our mailing list? Yes/No (Circle one)
MONA	M' Qual	RAB -				Yes No
Frank	M' Quay		I I i wy m	muton NY		
JASEN F	orydies	ENSOL	GGI MAINST	NIAGARA FALLS NY	abrid jbrydges	e ensolmacy Ves No
					, -	No
						Yes No
						Yes No
						Yes No
						Yes No
						Yes No
						Yes No
						Yes No

This event is being videotaped and/or photographed for future broadcast for use in public information products. Your attendance at this event constitutes your permission for us to quote you and use your image in such products.

(Privacy Act Statement on Reverse)

- 1. Authority: Comprehensive Environmental Response, Compensation, and Liability Act of 1980, as amended (42 U.S.C. section 9601 et seq.)
- 2. Principal Purposes: To obtain information from individuals in attendance at public meetings. Requested data include name, address, title/occupation, representing self or organization, and address of organization. The form also asks if the individual desires to make an oral or written statement concerning the planned activity under discussion, and requests the subject of the statement.
- 3. Routine Uses: Purposes of the form are:
  - a. To obtain data to be used in formulation mailing lists to notify appropriate individuals of future meetings.
  - b. To learn the desires of the individual regarding statements he/she wishes to make at the meeting or intends to submit, so that no person will be overlooked.
  - c. To gather brief occupational profile information to facilitate agency correlation of views and areas of expertise.
- **4. Mandatory or Voluntary Disclosures and Effect on Individual Not Providing Information:** All information requested in voluntary. Public meetings are held to offer individuals an opportunity to participate in the planning process. The only effect on the individual in the event he/she chooses not to furnish requested information is that the effectiveness of his/her participation would be lessened to whatever extent he/she elected to remain anonymous.

PRIVACY ACT STATEMENT – Revised 1 October 1984

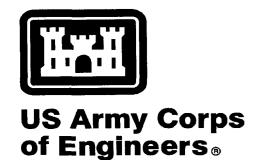


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Please Pri	Please Print Clearly  Name Representing Address City/State/Zip Code E-mail address					Would you like to be added to our mailing list? Yes/No (Circle one)	
Jeff Duner Telly Duffy					Yes No		
		- Sentinel -			Yes	No	
	<i>'</i>				Yes	No	
					Yes	No	
					Yes	No	
					Yes	No	
					Yes	No	
					Yes	No	
					Yes	No	
					Yes	No	
					Yes	No	

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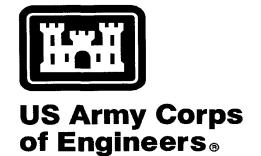
Please Pri Name	int Clearly Representing	Address	City/State/Zip Code	E-mail address	Would you like to be added to our mailing list? Yes/No (Circle one)
MIKE WEIGHT	SAAW RAI				eg No
ANDREWUR		22			es No
SEFFREY	GIALL DOE	2			'es No
B11 50	oulle Show Group	<u> </u>			<u>'es No</u>
Bonnie G	ackin —	<u></u>			<u>′es No</u>
DAVID Are	At Env. Raiss	<u>)                                    </u>			es No
Daniel Cis	zek Rep Louise Slan	ugi			'es (No
Kristin	Parce	V <sub>4</sub>			'es No
Willea	in a. Clobay	Z			es No
190h V	Belten				<u>'es No</u>
					Yes No

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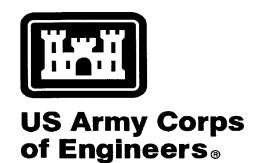
Please Pri	int Clearly Representing	Address	Citv/State/Zip Code	E-mail address	Would you like to be added to our mailing list? Yes/No (Circle one)
Name		- Auuress	Citv/State/Zib Code	E-IIIaii auuless	es No
JAMES D	ARUALL SHAW	_			
Lori Ca	ISO WM				is No
Janes J.	Devald NoDOH	_			es No
Bill Loce	na Cabrera				s No
ann Role	ito RAB	- -			s No
Jul Bana	szah Cwm	_			s) No ar
N.19 ()1	sh ICAB				s No
STUARE	PRYCE ENSOL				S No A
Karen A	the RAB				15 No Alread.
Velzon	+ Phyllis Farcion	<u></u>			⊘μ ' ⊇ <mark>s No</mark>
Guy M	Zuczek NCCC	_			s No Hivand,

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Name	Representing	Address	City/State/Zip Code	E-mail address	(Circle one)
of.	Mare -				Yes No
Mike	Basile WERA				Yes Nø
Paul	Dicky NCDOH				(Yes) No
					Yes No
					Yes No
					Yes No
					Yes No
					Yes No
					Yes No
		·			Yes No
					Yes No

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