

Special Exposure Cohort Petition — Form B

Page

Use of this form and disclosure of Social Security Number are voluntary. Failure to use this form or disclose this number will not result in the denial of any right, benefit, or privilege to which you may be entitled.

General Instructions on Completing this Form (complete instructions are available in a separate packet)

Except for signatures, please PRINT all information clearly and neatly on the form.

Please read each of Parts A — G in this form and complete the parts appropriate to you. If there is more than one petitioner, then each petitioner should complete those sections of parts A — C of the form that apply to them. Additional copies of the first two pages of this form are provided at the end of the form for this purpose. A maximum of three petitioners is allowed.

If you need more space to provide additional information, use the continuation page provided at the end of the form and attach the completed continuation page(s) to Form B.

If you have questions about the use of this form, please call the following NIOSH toll-free phone number request to speak to someone in the Office of Compensation Analysis and Support about an SEC petition **1-800-356-4674**.

If you are:	<input type="checkbox"/> A Labor Organization,	Start at D	on Page 3
	<input type="checkbox"/> An Energy Employee (current or former),	Start at C	on Page 2
	<input checked="" type="checkbox"/> A Survivor (of a former Energy Employee),	Start at B	on Page 2
	<input type="checkbox"/> A Representative (of a current or former Energy Employee),	Start at A	on Page 1

**A Representative Information — Complete Section A if you are authorized by an Employee or Survivor(s) to petition on behalf of a class.**

**A.1 Are you a contact person for an organization?**  Yes (Go to A.2)  No (Go to A.3)

**A.2 Organization Information:**

Name of Organization \_\_\_\_\_

Position of Contact Person \_\_\_\_\_

**A.3 Name of Petition Representative:**

Mr./Mrs./Ms. First Name \_\_\_\_\_

Middle Initial \_\_\_\_\_

Last Name \_\_\_\_\_

**A.4 Address:**

Street \_\_\_\_\_

Apt # \_\_\_\_\_

P.O. Box \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

**A.5 Telephone Number:** (\_\_\_\_) \_\_\_\_\_

**A.6 Email Address:** \_\_\_\_\_

**A.7**  Check the box at left to indicate you have attached to the back of this form written authorization petition by the survivor(s) or employee(s) indicated in Parts B or C of this form. An authorization

If you are representing a Survivor, go to Part B; if you are representing an Employee, go to Part

Name or Social Security Number of First Petitioner: \_\_\_\_\_

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**B Survivor Information — Complete Section B if you are a Survivor or representing a Survivor**

**B.1 Name:**  
Mr./Mrs./Ms. First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

**B.2 Social Security Number of Survivor:** \_\_\_\_\_

**B.3 Address of Survivor:**  
Street \_\_\_\_\_ Apt # \_\_\_\_\_ P.O. Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**B.4 Telephone Number of Survivor:** \_\_\_\_\_

**B.5 Email Address of Survivor:** \_\_\_\_\_

**B.6 Relationship to Employee:** Spouse  Son/Daughter  Parent  
Grandparent  Grandchild

**C Employee Information — Complete Section C UNLESS you are a labor organization.**

**C.1 Name of Employee:**  
Mr./Mrs./Ms. First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

**C.2 Former Name of Employee (e.g., maiden name/legal name change/other):**  
Mr./Mrs./Ms. First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

**C.3 Social Security Number of Employee:** \_\_\_\_\_

**C.4 Address of Employee (if living):**  
Street \_\_\_\_\_ Apt # \_\_\_\_\_ P.O. Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**C.5 Telephone Number of Employee:** \_\_\_\_\_

**C.6 Email Address of Employee:** \_\_\_\_\_

**C.7 Employment Information Related to Petition**

**C.7a Employee Number (if known):** \_\_\_\_\_

**C.7b Dates of Employment:** Start \_\_\_\_\_ End \_\_\_\_\_

**C.7c Employer Name:** LLNL (+ PACIFIC PROVING GROUND)

**C.7d Work Site Location:** ENEWETAK Island - PPG July-Aug. 1951  
LIVERMORE, CALIFORNIA

**C.7e Supervisor's Name:** do not recall

Go to Part E.

Name or Social Security Number of First Petitioner: \_\_\_\_\_

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**D Labor Organization Information — Complete Section D ONLY if you are a labor organization**

**D.1 Labor Organization Information:**

Name of Organization \_\_\_\_\_

Position of Contact Person \_\_\_\_\_

**D.2 Name of Petition Representative:**

**D.3 Address of Petition Representative:**

Street \_\_\_\_\_

Apt # \_\_\_\_\_

P.O. Box \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

**D.4 Telephone Number of Petition Representative:** ( ) \_\_\_\_\_

**D.5 Email Address of Petition Representative:** \_\_\_\_\_

**D.6 Period during which labor organization represented employees covered by this petition**  
(please attach documentation): Start \_\_\_\_\_ End \_\_\_\_\_

**D.7 Identity of other labor organizations that may represent or have represented this class of employees (if known):**

**Go to Part E.**

Name or Social Security Number of First Petitioner: \_\_\_\_\_

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E Proposed Definition of Employee Class Covered by Petition — Complete Section E.

E.1 Name of DOE or AWE Facility: LLNL - PACIFIC PROVING GROUND  
OPERATION HARDTACK

E.2 Locations at the Facility relevant to this petition:  
ENEWETAK ATOLL - OPERATION HARDTACK

E.3 List job titles and/or job duties of employees included in the class. In addition, you can list name any individuals other than petitioners identified on this form who you believe should be included in this class:

- SCIENTIFIC COURIER
- SCIENTISTS

E.4 Employment Dates relevant to this petition:

Start	_____	End	_____
Start	_____	End	_____
Start	_____	End	_____

E.5 Is the petition based on one or more unmonitored, unrecorded, or inadequately monitored recorded exposure incidents?  Yes  No

If yes, provide the date(s) of the incident(s) and a complete description (attach additional pages as necessary):

There were several incidents at ENEWETAK ATOLL  
• scientists gathered in areas where boxes were discovered to leak radiation  
• swimming in possibly contaminated waters with no monitoring for internal exposures due to ingested or inhaled radioactive material.  
\_\_\_\_\_ was part of the group gathered when a box used as a seat was discovered to leak radiation. He expressed concern in later years about swimming in areas that were potentially contaminated, about ingesting and inhaling radioactive material.

Go to Part F.

Name or Social Security Number of First Petitioner: \_\_\_\_\_

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**F Basis for Proposing that Records and Information are Inadequate for Individual Dose —  
Complete Section F.**

Complete at least one of the following entries in this section by checking the appropriate box and provide the required information related to the selection. You are not required to complete more than one entry.

- F.1  I/We have attached either documents or statements provided by affidavit that indicate that radiation exposures and radiation doses potentially incurred by members of the proposed class that relate to this petition, were not monitored, either through personal monitoring or through area monitoring.

(Attach documents and/or affidavits to the back of the petition form.)

Describe as completely as possible, to the extent it might be unclear, how the attached documentation and/or affidavit(s) indicate that potential radiation exposures were not monitored.

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- F.2  I/We have attached either documents or statements provided by affidavit that indicate that radiation monitoring records for members of the proposed class have been lost, falsified, or destroyed; or that there is no information regarding monitoring, source, source term, or procedure from the site where the employees worked.

(Attach documents and/or affidavits to the back of the petition form.)

Describe as completely as possible, to the extent it might be unclear, how the attached documentation and/or affidavit(s) indicate that radiation monitoring records for members of the proposed class have been lost, altered illegally, or destroyed.

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**Part F is continued on the following page.**

Name or Social Security Number of First Petitioner: \_\_\_\_\_

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F.3  I/We have attached a report from a health physicist or other individual with expertise in radiation dose reconstruction documenting the limitations of existing DOE or AWE records on radiation exposures at the facility, as relevant to the petition. The report specifies the basis for believing these documented limitations might prevent the completion of dose reconstructions members of the class under 42 CFR Part 82 and related NIOSH technical implementation guidelines.

(Attach report to the back of the petition form.)

F.4  I/We have attached a scientific or technical report, issued by a government agency of the Executive Branch of Government or the General Accounting Office, the Nuclear Regulatory Commission, or the Defense Nuclear Facilities Safety Board, or published in a peer-reviewed journal, that identifies dosimetry and related information that are unavailable (due to either a lack of monitoring or the destruction or loss of records) for estimating the radiation doses of employees covered by the petition.

(Attach report to the back of the petition form.)

*see attachment*

Go to Part G.

**G Signature of Person(s) Submitting this Petition — Complete Section G.**

All Petitioners should sign and date the petition. A maximum of three persons may sign the petition.

Signature

Date

Signature

Date

Signature

Date

**Notice:** Any person who knowingly makes any false statement, misrepresentation, concealment of fact or any other act of fraud to obtain compensation as provided under EEOICPA or who knowingly accepts compensation to which that person is not entitled is subject to civil or administrative remedies as well as felony criminal prosecution and may, under appropriate criminal provisions, be punished by a fine or imprisonment or both. I affirm that the information provided on this form is accurate and true.

Send this form to: SEC Petition  
Office of Compensation Analysis and Support  
NIOSH  
4676 Columbia Parkway, MS-C-47  
Cincinnati, OH 45226

If there are additional petitioners, they must complete the Appendix Forms for additional petitioners. The Appendix forms are located at the end of this document.

Name or Social Security Number of First Petitioner: \_\_\_\_\_

### Public Burden Statement

Public reporting burden for this collection of information is estimated to average 300 minutes per response including time for reviewing instructions, gathering the information needed, and completing the form. If you have any comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, send them to CDC Reports Clearance Officer, 1600 Clifton Road, MS-E-11, Atlanta GA, 30333; ATTN:PRA 0920-0639. Do not send the completed petition form to that address. Completed petitions are to be submitted to NIOSH at the address provided in these instructions. Persons are not required to respond to the information collected on this form unless it displays a current valid OMB number.

### Privacy Act Advisement

In accordance with the Privacy Act of 1974, as amended (5 U.S.C. § 552a), you are hereby notified of the following:

The Energy Employees Occupational Illness Compensation Program Act (42 U.S.C. §§ 7384-7385) (EEOICPA) authorizes the President to designate additional classes of employees to be included in the Special Exposure Cohort (SEC). EEOICPA authorizes HHS to implement its responsibilities with the assistance of the National Institute for Occupational Safety (NIOSH), an Institute of the Centers for Disease Control and Prevention. Information obtained by NIOSH in connection with petitions for including additional classes of employees in the SEC will be used to evaluate the petition and report findings to the Advisory Board on Radiation and Worker Health and HHS.

Records containing identifiable information become part of an existing NIOSH system of records under the Privacy Act, 09-20-147 "Occupational Health Epidemiological Studies and EEOICPA Program Records. HHS/CDC/NIOSH." These records are treated in a confidential manner, unless otherwise compelled by law. Disclosures that NIOSH may need to make for the processing of your petition or other purposes are listed below.

NIOSH may need to disclose personal identifying information to: (a) the Department of Energy, other federal agencies, other government or private entities and to private sector employers to permit these entities to retrieve records required by NIOSH; (b) identified witnesses as designated by NIOSH so that these individuals can provide information to assist with the evaluation of SEC petitions; (c) contractors assisting NIOSH; (d) collaborating researchers, under certain limited circumstances to conduct further investigation; (e) Federal, state and local agencies for law enforcement purposes; and (f) a Member of Congress or a Congressional staff member in response to a verified inquiry.

This notice applies to all forms and informational requests that you may receive from NIOSH in connection with the evaluation of an SEC petition.

Use of the NIOSH petition forms (A and B) is voluntary but your provision of information required by these forms is mandatory for the consideration of a petition, as specified under 42 CFR Part 83. Petitions that do not provide required information may not be considered by HHS.

Name or Social Security Number of First Petitioner: \_\_\_\_\_

Continuation Page — Photocopy and complete as necessary.

The attached information highlighted in yellow,  
although referencing a different testing site,  
is still relevant for the ENEWETAK ATOLL  
during OPERATION HARDTACK I,  
was present during the following tests in June  
and August.

- PINE
- TEAK
- Quince
- FIG

- 3 ENEWETAK
- Johnstone Isl
- 2 Enewetak
- Enewetak

The methods employed to monitor radiation  
exposure in was not as sophisticated  
or technologically as advanced as the current  
methods.

Attach to Form B if necessary.

Name or Social Security Number of First Petitioner: \_\_\_\_\_

excess childhood leukemia mortality reported by Lyon et al." [27]. Land et al. used childhood cancer mortality data from the National Center for Health Statistics 1950-78 and examined geographic and temporal variation for leukemia and childhood cancer other than leukemia mortality, comparing northern and southern Utah (using the same geographic partitioning as Lyon et al.), eastern Oregon, Iowa, and the entire U.S. They found no statistically significant geographic or temporal differences, but an apparent downward trend over time in childhood leukemia mortality. They concluded that their data did not support the Lyon et al. conclusion of increased risk associated with exposure to fallout in southern Utah and that, most likely, Lyon et al. had based their conclusion on "an anomalously low leukemia rate in southern Utah during the period 1944 to 1949" [28].

Caldwell et al. showed a significant increase in leukemia (9 cases observed while 3.5 were expected) among 3,224 men who participated in military maneuvers during the 1957 nuclear detonation of a 44-kiloton bomb called "Smoky" in Nevada [27]. Nine cases (4 AML, 3 CML, 1 ALL, and one with hairy cell leukemia) occurred when 3.5 were expected. The only exposure data available were in the form of film badges showing an average whole-body gamma dose of 466.2 mrem for the entire cohort and a mean dose of 1,167 mrem for cases. However, as the authors indicated, there are several problems with the exposure data including: a significant number of badge dose readings of zero, the badge dose representing a cumulative dose received from the entire series of tests with no specific information about the individual doses comprising the cumulative dose that may have come from other sources of radiation exposure; badge doses reflecting only external radiation exposures from gamma and beta radiation; and no information about neutron exposure or internal exposure. There was no monitoring for internal exposures due to ingested or inhaled radioactive material. The cases or their next-of-kin were questioned as to other possible leukemogenic exposures. Three of the cases may have had additional exposures (from pesticides, chloramphenicol, and cosmic radiation in the case of a commercial airline pilot). The latent period between exposure and onset of leukemia averaged 14.4 years, longer than that of the Japanese atomic-bomb survivors for whom minimal latency was approximately four years and maximum latency was 10-12 years. Follow-up of the Smoky cohort was incomplete (76%) and hence conclusions must be interpreted with caution (see Table 6-5).

#### Leukemia in Radiologists

Seltser and Sartwell [28] and Matanoski et al. [29, 30] examined the mortality experience of American radiologists (members of the Radiological

"THE LEUKEMIAS"  
 EPIDEMIOLOGIC ASPECTS  
 MARTHA S. LINET 1985

Table 6-5 Studies examining the relationship between leukemia and exposure to nuclear weapons, fallout, or nuclear facilities

Author(s), year	Study group	Type of radiation	Amt. of radiation	Findings with respect to leukemia
		Hiroshima: gamma rays and neutrons Nagasaki: gamma rays primarily	0-400+ rads	Leukemia (including ALL, AML, CML, but <i>not</i> CLL) was increased. There was a late mortality effect of nuclear radiation. There was a stronger radiation carcinogenic effect for Hiroshima than Nagasaki.
	Children in Utah under 15 years of age from 1944-75 including 378 children who died from leukemia or other cancers.	Gamma rays from nuclear tests carried out in Nevada during the 1950's.	Unknown	Observed leukemia mortality in high-exposure counties was 2.44-fold for the high-exposure children living in high fallout southern Utah compared with low-exposure counties. Leukemia cases were available on most death certificates.
Galdwell et al., 1980 [29]	3224 men who participated in military maneuvers during the 1957 nuclear test explosion "Smoky"	Gamma rays	0-2.98 rems	Statistically significant increase in leukemia incidence; 9 cases were observed vs. 3.5 were expected. The time of nuclear test to diagnosis ranged from 2 to 19 years. Cell types: 1 ALL, 1 AML, 3 CML, and 1 CLL.
Mancuso et al., 1977 [39] Anderson et al., 1978 [44] Hutchison et al., 1978 [42] Gilbert et al., 1979 [43]	27,960 Hanford Nuclear Facility workers	Gamma rays	0-50 rads	No excess of leukemia mortality observed. However, mortality rates for lung cancer, multiple myeloma, and prostate cancer were elevated.
Najarian et al., 1978 [45] Colton et al., 1980 [46]	1722 nuclear workers at the Portsmouth Naval Shipyard. Reanalysis based on 1038 deaths.	Gamma rays	For exposed workers the total cumulative recorded exposure ranged from 0.001 to 64.9 rem.	Original analysis based on recollections of next-of-kin showed that there was no excess of leukemia among workers exposed to radiation.

## **Operation Hardtack I**

### **1958 - Pacific Proving Grounds**

**During Operation Hardtack 1 and 2 (1958)** there were 62 US atomic weapons fired into the atmosphere, fifteen other devices were detonated underground. The Soviet Union also fired 34 atomic weapons above ground in 1958. The British exploded 5 weapons at Christmas Island. There were 16,000 DOD personnel involved in the US tests.

Hardtack I included 35 tests, the largest test series so far (1958 in fact saw a total of 77 U.S. tests, more than the three previous record setting years combined). Partly this burst of testing activity was due to building pressure for an imminent test moratorium, leading the weapons labs to rush as many device types to the test range as possible. A total of 35.6 megatons were shot during this series.

The lab tests centered on ICBM and SLBM missile warheads and high yield strategic bombs. The DOD conducted high altitude multi-megaton tests to study their usefulness for ABM (anti-ballistic missile) warheads, and discovered the high-altitude EMP (electromagnetic pulse) effect in the process. Effects tests of underwater explosions were also conducted.

The extensive test schedule required the use not only of both atolls (Bikini and Enewetak) but Johnston Island also. This series was the last to conduct atmospheric testing at Bikini and Enewetak atolls. Test names were taken from North American trees and shrubs.

Source: [nuclearweaponarchive.org](http://nuclearweaponarchive.org)

Hardtack I consisted of three portions; the first was the development of nuclear weapons. This was a continuation of the type of testing conducted at Enewetak and Bikini during the early and mid-1950s. In these tests, the weapons development laboratories, Los Alamos Scientific Laboratory and the University of California Radiation Laboratory, detonated their experimental devices, while the Department of Defense (DoD) provided support and conducted experiments that did not interfere with Atomic Energy Commission activities.

The second portion, sponsored by DoD, consisted of the underwater tests WAHOO and UMBRELLA. WAHOO was detonated in the open ocean and UMBRELLA in the lagoon at Enewetak. The purpose of these tests was to improve the understanding of the effects of underwater explosions on Navy ships and material. These were continuations of earlier underwater testing that included BAKER in Crossroads at Bikini in 1946 and WIGWAM off the U.S. West Coast in 1955.

The DoD also sponsored the third portion, addressing the military problems of air-borne nuclear weapon defense. Three high-altitude tests featured rocket-borne TEAK and ORANGE at Johnston Island and balloon-hoisted YUCCA between Enewetak and Bikini.

Two major aspects of Hardtack I's experimental program were the development of the weapons themselves and the measurement of the explosive and radiation effects. Also, since the development of a nuclear armed fleet ballistic missile was on a fast track, a portion of Hardtack I was devoted to testing the warhead for the Polaris missile.

The tests comprising the 1958 Operation Hardtack I were as follows:

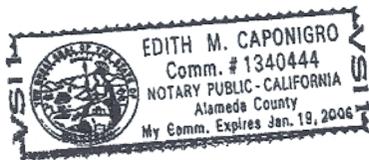
YUCCA, April 28, Pacific (between Enewetak and Bikini), balloon, weapons effects, 1.7 kilotons (kt)  
CACTUS, May 5, Enewetak, surface, weapons related, 18 kt  
FIR, May 11, near Bikini, barge, weapons related, 1.36 megatons (Mt)  
BUTTERNUT, May 11, near Enewetak, barge, weapons related, 81 kt  
KOA, May 12, Enewetak, surface, weapons related, 1.37 Mt  
WAHOO, May 16, near Enewetak, underwater, weapons effects, 9 kt  
HOLLY, May 20, near Enewetak, barge, weapons related, 5.9 kt  
NUTMEG, May 21, near Bikini, barge, weapons related, 25.1 kt  
YELLOWWOOD, May 26, near Enewetak, barge, weapons related, 330 kt  
MAGNOLIA, May 26, near Enewetak, barge, weapons related, 57 kt  
TOBACCO, May 30, near Enewetak, barge, weapons related, 11.6 kt  
SYCAMORE, May 31, near Bikini, barge, weapons related, 92 kt  
ROSE, June 2, near Enewetak, barge, weapons related, 15 kt  
UMBRELLA, June 8, near Enewetak, underwater, weapons effects, 8 kt  
MAPLE, June 10, near Bikini, barge, weapons related, 213 kt  
ASPEN, June 14, near Bikini, barge, weapons related, 319 kt  
WALNUT, June 14, near Enewetak, barge, weapons related, 1.45 Mt  
LINDEN, June 18, near Enewetak, barge, weapons related, 11 kt  
REDWOOD, June 27, near Bikini, barge, weapons related, 412 kt  
ELDER, June 27, near Enewetak, barge, weapons related, 880 kt  
OAK, June 28, near Enewetak, barge, weapons related, 8.9 Mt  
HICKORY, June 29, near Bikini, barge, weapons related, 14 kt  
SEQUOIA, July 1, near Enewetak, barge, weapons related, 5.2 kt  
CEDAR, July 2, near Bikini, barge, weapons related, 220 kt  
DOGWOOD, July 5, near Enewetak, barge, weapons related, 397 kt  
POPLAR, July 12, near Bikini, barge, weapons related, 9.3 Mt  
SCAEVOLA, July 14, near Enewetak, barge, safety experiment, zero yield  
PISONIA, July 17, near Enewetak, barge, weapons related, 255 kt  
JUNIPER, July 22, near Bikini, barge, weapons related, 65 kt  
OLIVE, July 22, near Enewetak, barge, weapons related, 202 kt  
PINE, July 26, near Enewetak, barge, weapons related, 2 Mt  
TEAK, August 1, off Johnston Island area, rocket, weapons effects, 3.8 Mt  
QUINCE, August 6, Enewetak, surface, weapons related, zero yield  
ORANGE, August 12, off Johnston Island area, rocket, weapons effects, 3.8 Mt  
FIG, August 18, Enewetak, surface, weapons related, 20 tons

**ATTACHMENT : To be inserted in F.1 in my petition #**

There were several incidents at ENEWETAK ATOLL :

- Scientists gathered in areas where boxes were discovered to leak radiation
- Swimming in potentially contaminated waters from radioactive fallout
- No monitoring for internal exposures due to ingested or inhaled radioactive material

was part of a group gathered when a box used as a seat was discovered to leak radiation. He expressed concern in later years about swimming in areas that were potentially contaminated with radioactive fallout and also about ingesting and inhaling radioactive material.



*Edith M Caponigro*  
3-1-05

2005 MAR 7 AM 11 29

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of CALIFORNIA

County of ALAMEDA

On MARCH 1, 2005 Date

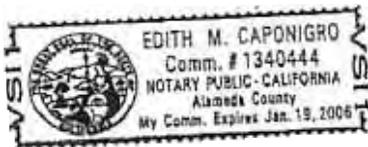
2005 MAR 7 AM 11 20 before me, EDITH M. CAPONIGRO Name, Title of Officer

personally appeared

personally known to me OR

Name(s) of Signer(s)

proven to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Signature of Notary

\*\*\*\*\*OPTIONAL\*\*\*\*\* Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

Capacity Claimed By Signer

Description Of attached Document

Individual Corporate Officer

Title(s)

Title or Type of Document

Partner(s) Limited General

Attorney-In-Fact Trustee(s) Guardian/Conservator Other:

Number of Pages

Date of Document

Signer is Representing: Name of Person(s) or Entity(ies)

Signer(s) Other Than Named Above