

	Public Meeting Sign In Sheet
	Meeting:
	Date:
Location:	

This information is voluntary. Its purpose is to ensure fair and equal representation by the public in all projects and programs administered by the Alaska Department of Transportation and Public Facilities.

Please print legibly- Thanks!

Name/Email/Phone	Company/Address/ Signature	Please check all that apply:			
		Female	<input type="checkbox"/>	Male	<input type="checkbox"/>
		White	<input type="checkbox"/>	Hispanic	<input type="checkbox"/>
		AK Native	<input type="checkbox"/>	Asian	<input type="checkbox"/>
		N. American	<input type="checkbox"/>	Pac. Islander	<input type="checkbox"/>
		Black	<input type="checkbox"/>	Other	<input type="checkbox"/>
		Female	<input type="checkbox"/>	Male	<input type="checkbox"/>
		White	<input type="checkbox"/>	Hispanic	<input type="checkbox"/>
		AK Native	<input type="checkbox"/>	Asian	<input type="checkbox"/>
		N. American	<input type="checkbox"/>	Pac. Islander	<input type="checkbox"/>
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