

Name of person
collecting signatures: **Marek Hajduczenia**

date
date **26.01.2008**

Please check
one box, and
sign your
name, for each
comment.

OK

The committee's resolution of my required comment is satisfactory. In the event that all of my required comments are resolved to my satisfaction then I authorize the committee chairman to change my vote from DISAPPROVE to APPROVE WITH COMMENT.

NOT OK

I do not find the committee's resolution of my required comment satisfactory. My vote in regard to this item remains DISAPPROVE.

Marek, Hajduczenia

signed

date

# 73	CI 91	SC 91.1	P: 121	L: 38	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 74	CI 91	SC 91.5.1	P: 133	L: 42	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 75	CI 91	SC 91.5.2	P: 136	L: 36	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 77	CI 64	SC 64.1.2	P: 244	L: 51	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 78	CI 64	SC 64.1.2	P: 245	L: 2	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____

Chang, Frank

signed

date

# 406	CI 91	SC 91.6	P: 142	L:	TR / D / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 408	CI 91	SC 91.5.2	P: 141	L:	ER / R / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 409	CI 91	SC 91.6	P: 142	L:	ER / R / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 410	CI 91	SC 91.1	P: 123	L: 18	TR / D / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 411	CI 91	SC 91.2.1	P: 130	L: 1	TR / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____

Dawe, Piers

signed

date

# 336	CI 91	SC 91.6	P: 138	L: 21	TR / R / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
-------	-------	---------	--------	-------	------------	-----------------------------	---------------------------------	-------	-------

Kramer, Glen

signed

date

# 117	CI 91	SC 91.1	P: 121	L: 34	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
-------	-------	---------	--------	-------	------------	-----------------------------	---------------------------------	-------	-------

Name of person
collecting signatures: **Marek Hajduczenia**

date
date **26.01.2008**

Please check
one box, and
sign your
name, for each
comment.

OK

The committee's resolution of my required comment is satisfactory. In the event that all of my required comments are resolved to my satisfaction then I authorize the committee chairman to change my vote from DISAPPROVE to APPROVE WITH COMMENT.

NOT OK

I do not find the committee's resolution of my required comment satisfactory. My vote in regard to this item remains DISAPPROVE.

Remain, Duane

# 110	CI 91	SC 91.4.1	P: 130	L: 47	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 111	CI 64	SC 64.3.3	P: 264	L: 1	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
# 112	CI 92	SC 92.2.2.1	P: 307	L: 24	ER / D / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____

Suzuki, Ken-Ichi

# 362	CI 91	SC 91.4.1	P: 130	L: 33	ER / A / W	OK <input type="checkbox"/>	NOT OK <input type="checkbox"/>	_____	_____
-------	-------	-----------	--------	-------	------------	-----------------------------	---------------------------------	-------	-------