FAX COVER SHEET

Date: __________________

From: ____________________________

   Phone #: _________________________

   Fax #: __________________________

To: ______________________________

   Fax #: __________________________

Confirmation Requested: Yes ____   No ____

Number of pages, including cover sheet: ______

Message: ________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

NOTICE

The information contained in this facsimile is private and confidential information and intended only for the use of the recipient named above. The authorized recipient is prohibited from disclosing this information to any other party unless required to do so by law or regulation and is required to destroy the information after its stated need has been fulfilled. If you, the reader, are not the intended recipient, you are hereby notified that any dissemination, distribution, duplication, or action taken in reliance on the contents of any part of this communication is strictly prohibited. If you have received this communication in error, please destroy this information and notify the sender at the email address, telephone number, or fax number listed above. Unauthorized access to confidential information is subject to federal and state laws and could result in personal liability, fines, and imprisonment.