

D.

OMB Approval No. 1205-XXXX

Expiration date: xx/xx/xx

Project Operator Data Form

Project Operator:		
Street Address 1:		
Street Address 2:		
City:	State:	Zip Code:
Contact Person:		
Telephone:		
FAX:		
Email:		
Project Duration: Start	End	
Funding Level: \$		
Number of Participants:		
Counties included in Service Area:		

ETA 9107
(February 2003)

The reporting requirements are approved by OMB according to the Paperwork Reduction Act of 1995 under OMB approval No. 1205-XXXX. **NOTE:** Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondent's obligation to reply to these reporting requirements are mandatory (PL: 107-210). Public reporting burden for this collection of information is estimated at 30 minutes.

Send comments regarding the burden estimate or any other aspect of this collection, including suggestions for reducing this burden to the U.S. Department of Labor, Office of National Response, Room N-5422, Washington D.C. 20210.
(Paperwork Reduction Project 1205-XXXX).