



Sign-in Sheet Carolina Crossroads Public Hearing August 23, 2018



U.S. Department of Transportation
Federal Highway Administration

NOTE: Information provided, including name and address, will be published and is subject to disclosure under the Freedom of Information Act.

Contact Information		Notification & Demographic Information <i>(Optional)</i>				Photo Release
		How were you notified about the public hearing?	Gender	Age Range	Race/Ethnicity	
Name	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> 15-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65+	<input type="checkbox"/> White <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Other	<input type="checkbox"/> Yes , I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No , I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization <i>(if applicable)</i>						
Name						
Organization <i>(if applicable)</i>						
Name						
Organization <i>(if applicable)</i>						
Name	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> 15-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65+	<input type="checkbox"/> White <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Other	<input type="checkbox"/> Yes , I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No , I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization <i>(if applicable)</i>						
Name						
Organization <i>(if applicable)</i>						
Name						
Organization <i>(if applicable)</i>						
Name	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> 15-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65+	<input type="checkbox"/> White <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Other	<input type="checkbox"/> Yes , I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No , I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization <i>(if applicable)</i>						
Name						
Organization <i>(if applicable)</i>						
Name						
Organization <i>(if applicable)</i>						

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Appendix B – Sign-In Sheets and Formal Comment Sign-Up Forms



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Contact Information		Notification & Demographic Information (Optional)			Photo Release
		How were you notified about the public hearing?	Gender	Age Range	
Name <i>Archie Ard</i>	Address <i>634 Augusta St</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other			<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>W Columbia</i>				
Phone <i>803-351-1531</i>	Email <i>archie.ard@gmail.com</i>				
Name <i>DAVID L WEATHERS</i>	Address <i>425 LETON DR</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other			<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>29210</i>				
Phone <i>1-803-665-1961</i>	Email <i>NONE</i>				
Name <i>John B Newman Jr</i>	Address <i>1439 MANLEY DR</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other			<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Cola SC. 29210</i>				
Phone <i>803-319-2462</i>	Email				
Name <i>KENNETH C NYE</i>	Address <i>1443 MANLEY DR.</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other			<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>COLA. SC 29210</i>				
Phone <i>803-551-2645</i>	Email				

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>GEORGE MELONAS</i>	Address <i>1538 LAZY CREEK CT</i> City/Zip <i>CHAPIN, S.C. 29136</i> Phone <i>(803) 345-7157</i> Email <i>N/A</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>ANGELA MELONAS</i>	Address <i>1511 SHADY LANE</i> City/Zip <i>COLUMBIA, SC 29206</i> Phone <i>803/782-2502</i> Email <i>—</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input checked="" type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Don Westbury</i>	Address <i>218 TRAM RD</i> City/Zip <i>COLUMBIA SC</i> Phone <i>803-331-2097</i> Email <i>dswestbury@gmail.com</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>DAVID BISHOP</i> <i>David Bastan</i>	Address <i>1837 FAIRWAY DRIVE</i> City/Zip <i>COLUMBIA</i> Phone <i>803 260-1211</i> Email <i>DBI7337002@AOL</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Steve Little</i>	Address <i>450 Divided Dr</i> City/Zip <i>Peachtree City 30269</i> Phone <i>770-487-2300</i> Email <i>Steve.Little@kiewit.com</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input checked="" type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Jim Ewart</i>	Address <i>1354 Raintree Dr</i> City/Zip <i>Columbia, S.C. 29212</i> Phone <i>803-960-9163</i> Email <i>jim.ewart@wig.net</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Carmen Goulet</i>	Address <i>1000 Center Point Rd</i> City/Zip <i>Columbia SC 29210</i> Phone <i>744 3504</i> Email <i>cgoulet@scha.org</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>RON SHAW</i>	Address <i>633 Edgieton Downs Dr</i> City/Zip <i>Pineville NC 28134</i> Phone <i>704-588-5272</i> Email <i>RPSHAW@LEECONSTRUCTION.COM</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input checked="" type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Bert Pooser</i>	Address <i>Sunny Court</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>IMIC Hotels</i>	City/Zip <i>Columbia SC</i>					
Phone <i>803-772-2029</i>	Email <i>bpooser@imic-hotels.com</i>					
Name <i>Mark Bolding</i>	Address <i>19 Hilton Glen Ct</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>Homeowner (Jemul Rd)</i>	City/Zip <i>Chapin 29036</i>					
Phone <i>803-429-1023</i>	Email <i>bolding@bellsouth.net</i>					
Name <i>Brenda McGriff</i>	Address <i>4617 Wade St</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>Pinegrove/PineWoods Community Alliance</i>	City/Zip <i>Columbia SC 29210</i>					
Phone <i>803-798-8206</i>	Email <i>brendamcgriff@comcast.net</i>					
Name <i>Billy Badgor</i>	Address <i>225 Deadmore St</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input checked="" type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>AMT</i>	City/Zip <i>Abingdon, VA 24210</i>					
Phone <i>540-419-4486</i>	Email <i>dbadgor@amtengineering.com</i>					

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Beate Posen</i>	Address <i>1 Surrey CT</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>IMIC</i>	City/Zip <i>COLUMBIA SC 29212</i> Phone <i>803-772-2629</i> Email <i>bposen3@imichotus.com</i>					
Name <i>ROKUZAN KROENKE</i>	Address <i>426 Arrowwood Rd</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>COLUMBIA ZEN BUDDHIST PRIORY</i>	City/Zip <i>COLUMBIA 29210</i> Phone <i>803-772-7552</i> Email <i>CZBP@COLUMBIAZEN.ORG</i>					
Name <i>Fannie Bell</i>	Address <i>177 St. Andrews Rd.</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input checked="" type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input checked="" type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>Whitehall HOA</i>	City/Zip <i>COLUMBIA, 29210</i> Phone <i>803-960-6423</i> Email <i>febell22@yahoo.com</i>					
Name <i>Tom Badwell</i>	Address <i>128 Beechwood Dr.</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input checked="" type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Wingo SC 29063</i> Phone Email					

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		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Adam Lane</i>	Address <i>343 ASA Rose Ln.</i> City/Zip <i>Lexington 29072</i> Phone <i>704-733-8774</i> Email <i>alanenc@yahoo.com</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input checked="" type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Ariail King</i>	Address <i>PO Box 11208</i> City/Zip <i>Columbia SC 29211</i> Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Janie & Jerry Stone</i>	Address <i>521 Innsbrook Dr.</i> City/Zip <i>Columbia 29210</i> Phone <i>(803) 772-2387</i> Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Jim & Ada Rayson</i>	Address <i>712 Shadow Brook Dr</i> City/Zip <i>Columbia, 29210</i> Phone <i>772-8309</i> Email <i>jcrayson@bell/south.net</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input checked="" type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Federal Highway Administration

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Golden Floyd</i> Organization (if applicable)	Address <i>249 Tyborne Cir</i> City/Zip <i>Columbia SC 29210</i> Phone <i>(803) 750-1217</i> Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Carlos Fernandez</i> Organization (if applicable) <i>Ferrovial Agriman</i>	Address <i>3495 Piedmont Road</i> City/Zip <i>30305 - Atlanta</i> Phone Email <i>cfernandez@fernariavial.us</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Betty Tripp</i> Organization (if applicable)	Address <i>1307 Redricks Hwy</i> City/Zip <i>COLA, SC 29210</i> Phone <i>521-5606</i> Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Jay Patel</i> Organization (if applicable)	Address <i>127 Morninghill Dr</i> City/Zip <i>Columbia, SC, 29210</i> Phone <i>803 772 5833</i> Email <i>Jayesh1770@gmail.com</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Carrie Moore</i>	Address <i>4253 Donovan Dr</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>201 SC 29210</i>					<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Phone <i>803-7726601</i>	Phone <i>803-7726601</i>					
Email <i>Carrie.Moore@bell</i>	Email <i>Carrie.Moore@bell</i>					
	<i>South.net</i>					
Name <i>Jim Kupferer</i>	Address <i>100 FLOOR DANIEL DR.</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Greenville, SC 29607</i>					
<i>FLUOR</i>	Phone <i>864-281-8326</i>					
	Email <i>Jim.Kupferer@fluor.com</i>					
Name <i>Kevin Patten</i>	Address <i>2711 Middleburg Dr, Ste 213</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Columbia 29204</i>					
<i>Central Carolina Community Foundation</i>	Phone <i>803-978-7825</i>					
	Email <i>Kevin@yourfoundation.org</i>					
Name <i>Matthew Starling</i>	Address <i>474 Hampshire Drive Suite B</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Gaffney, SC 29340</i>					
<i>O.R. Colan Associates</i>	Phone <i>(330) - 741-0794</i>					
	Email <i>mstarling@orcolan.com</i>					

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Laura Drafts</i>	Address <i>3402 Fernandis Rd</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input checked="" type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input checked="" type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>TelCom Inc</i>	City/Zip <i>WCola SC 29070</i>					
	Phone <i>803-772-3304</i>					
	Email <i>telcomservice@telcomsc.com</i>					
Name <i>Joe MARTIN</i>	Address <i>236 NORHPARK DR. #200</i>	<input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input checked="" type="checkbox"/> Website <input checked="" type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>O.R. Colan Associates</i>	City/Zip <i>Rock Hill, SC</i>					
	Phone <i>704-944-1410</i>					
	Email <i>jmartin@orcolan.com</i>					
Name <i>Mary Burkett</i>	Address <i>87 Holly Ridge Ln.</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>WCola SC 29169</i>					
	Phone <i>803-465-1509</i>					
	Email <i>maryburkett34@hotmail.com</i>					
Name <i>Sofie Chikara</i>	Address <i>1811 Ivanhoe Dr</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Columbia 29210</i>					
	Phone					
	Email					

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Federal Highway Administration

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Contact Information		Notification & Demographic Information (Optional)				Photo Release
		How were you notified about the public hearing?	Gender	Age Range	Race/Ethnicity	
Name <i>Javier Pasand</i>	Address <i>3495 Piedmont Rd Buckhorns GA 30305</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input checked="" type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Galen MANAPAT</i>	Address <i>139 Stephanie dr Lexington (803) 832-7409 galenpmanapat@sc.rr.com</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Myra H. Raines</i>	Address <i>203 Arrowwood Columbia, SC 772-4721</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Hank Padgett</i>	Address <i>322 Arrowwood Rd Columbia, SC (803) 772-9610</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>HORACE BROWN</i>	Address <i>900 Pineywoods Rd</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input checked="" type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Columbia SC 29210</i>					
Phone <i>803 731 5385</i>	Email					
Name <i>MARION B. McLee</i>	Address <i>203 Amawood Rd.</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input checked="" type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Columbia, SC 29210</i>					
Phone <i>803 661-0283</i>	Email <i>marionbmc@aol.com</i>					
Name <i>Keith Wicker</i>	Address <i>411 Caddis Creek</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>Irmo</i>					
Phone	Email <i>keithwicker@comcast.net</i>					
Name <i>Erin Brooks</i>	Address <i>2020 Hampton St</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>Richland County</i>	City/Zip <i>Cola 29204</i>					
Phone	Email					

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Federal Highway Administration

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name MARK LANGBEIN Organization (if applicable)	Address 23A LANCENWOOD RD City/Zip OLA, SC 29210 Phone 803 318-0330 Email LANGBEIN59@aol.com	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name Angela Rogers Organization (if applicable) ABC Columbia News	Address City/Zip ABC Phone Columbia Email News	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name FRANK HEIBAR Organization (if applicable) ICBE	Address 1021 Broadharrowe City/Zip OLA, 29229 Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input checked="" type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name Karen Stitely Organization (if applicable) Paces Brook Apto	Address 113 Paces Brook Ave City/Zip COLUM, SC 29212 Phone 843-343-2995 Email kstitely@lms-realestate.com	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Sign-in Sheet Carolina Crossroads Public Hearing August 23, 2018



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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>6 Lora Ward</i>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Dave Looney</i>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Elizabeth A. Harris</i>	Address City/Zip Phone Email <i>lizzi_sco@gmail.com</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Anne Crook</i>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Sign-in Sheet Carolina Crossroads Public Hearing August 23, 2018



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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>TUCKER CREEP</i>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Nathaniel Land</i>	Address <i>133 Pond Oak Lane</i> City/Zip <i>Columbia 29212</i> Phone Email <i>nland@sc.m.com</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>William Krakoff</i>	Address <i>33 Canterbury Ct</i> City/Zip <i>Columbia SC</i> Phone Email <i>lidsman22@gmail.com</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input checked="" type="checkbox"/> Postcard <input checked="" type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Charles Sibley</i>	Address <i>977 Rocky Falls</i> City/Zip <i>IRMO, SC</i> Phone <i>603-730-4325</i> Email <i>thesibleyteam@gmail.com</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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U.S. Department of Transportation
Federal Highway Administration

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <u>TOMMY TURNER</u>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <u>JOHN GREGORY</u>	Address City/Zip Phone Email <u>JEGREGORY@NATAVANT.COM</u>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <u>James C LaBorde</u>	Address <u>108 Wexwood Ct</u> City/Zip <u>Cola 29210</u> Phone <u>803 798 7181</u> Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input checked="" type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <u>Adele Bonnette</u>	Address <u>203 Lancewood Rd</u> City/Zip <u>Columbia, 29210</u> Phone <u>803 798 5068</u> Email <u>adelebonnette@hotmail.com</u>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Federal Highway Administration

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Contact Information		Notification & Demographic Information (Optional)			Photo Release
		How were you notified about the public hearing?	Gender	Age Range	
Name <i>Frances Williams</i>	Address <i>1710 Holly Hill Dr</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other	[REDACTED]	[REDACTED]	<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>West Columbia 29169</i>				
Phone <i>678-592-4158</i>	Email				
Name <i>Al STEVENS</i>	Address <i>525 Sulgrave</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other	[REDACTED]	[REDACTED]	<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>COLA SC</i>				
Phone <i>7561252</i>	Email				
Name <i>JOHN RANA</i>	Address <i>4455 TILLY DR</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other	[REDACTED]	[REDACTED]	<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>CITAS SC</i>				
Phone <i>843 6070904</i>	Email <i>johnrana843@gmail.com</i>				
Name <i>PRESTON SMITH</i>	Address <i>1635 MORNINGHILL DR</i>	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input checked="" type="checkbox"/> Other	[REDACTED]	[REDACTED]	<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable)	City/Zip <i>COLUMBIA, SC 29210</i>				
Phone <i>803.422.2601</i>	Email <i>prestonesmith@gmail.com</i>				

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name Josh Gilman Organization (if applicable)	Address 1218 SHADY BLUFF DR. City/Zip CLT, NC 28211 Phone Email josh.gilman@stantec.com	<input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input checked="" type="checkbox"/> Radio <input type="checkbox"/> TV <input checked="" type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name ASHLEY POWELL Organization (if applicable) PICKLAND COUNTY	Address 2020 HAMPTON ST City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name Samantha DeWees Organization (if applicable)	Address 1204 Lexington Ave City/Zip IRMO SC 29063 Phone 803-766-0900 Email sam@deweessveg.com	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name Rheta DiNovo Organization (if applicable) RES	Address 701 East Bay St. City/Zip Charleston, SC 29405 Phone 843-619-4470 Email rdinovo@res.us	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Contact Information		Notification & Demographic Information (Optional)				Photo Release
		How were you notified about the public hearing?	Gender	Age Range	Race/Ethnicity	
Name <i>JERRY WILLIAMS</i>	Address <i>1710 HOLLY HILL DR</i> City/Zip <i>WEST COLUMBIA</i> Phone <i>678 910 8890</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Brian Crooks</i>	Address <i>2020 Hampton St</i> City/Zip <i>Columbia, 29204</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Sara Bazemore</i>	Address <i>701 East Bay St.</i> City/Zip <i>Charleston, SC 29405</i> Phone <i>803-622-1888</i> Email <i>sbazemore@res.us</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input checked="" type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Franklin Fant</i>	Address <i>2817 Ashland Rd</i> City/Zip <i>Columbia 29210</i> Phone <i>803-772-5885</i> Email <i>franklin.fant@PresComm.org</i>	<input type="checkbox"/> Email <input checked="" type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>EUGENE BEAUKHAN</i>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>MILLER, NATHANIEL</i>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Susan Atkins</i>	Address City/Zip Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Stan & Tracy Barfield</i>	Address City/Zip Phone Email	<input checked="" type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input checked="" type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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Sign-in Sheet Carolina Crossroads Public Hearing August 23, 2018



NOTE: Information provided, including name and address, will be published and is subject to disclosure under the Freedom of Information Act.

Contact Information		Notification & Demographic Information (Optional)				Photo Release
		How were you notified about the public hearing?	Gender	Age Range	Race/Ethnicity	
Name <i>Richard H. Mixson, Jr.</i>	Address <i>Box 637</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input checked="" type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>None</i>	City/Zip <i>Allendale S.C. 29810</i>					
Phone <i>803-584-2398</i>	Email <i>None</i>					
Name <i>Ashley C. Taylor</i>	Address <i>2817 Ashland Rd.</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>Presbyterian Communities of S.C.</i>	City/Zip <i>Columbia, S.C. 29210</i>					
Phone <i>803-772-5885</i>	Email <i>ataylor@prescharesc.org</i>					
Name <i>Don Ross</i>	Address <i>718 Santee</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input checked="" type="checkbox"/> Website <input checked="" type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>Palmetto Creek Pastors</i>	City/Zip <i>Columbia SC 29205</i>					
Phone <i>941-746-2911</i>	Email <i>dross@earthbalance.com</i>					
Name <i>Renee Shatter</i>	Address <i>103 Queen Anne Ct</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input checked="" type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Organization (if applicable) <i>Williamsburg West Noise SCDOT participant</i>	City/Zip <i>Columbia SC</i>					
Phone <i>803-798-2178</i>	Email <i>BR649549@hotmail.com</i>					

NOTE: Information provided, including name and address, will be published and is subject to disclosure under the Freedom of Information Act.

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Sign-in Sheet Carolina Crossroads Public Hearing August 23, 2018



U.S. Department of Transportation
Federal Highway Administration

NOTE: Information provided, including name and address, will be published and is subject to disclosure under the Freedom of Information Act.

Contact Information		Notification & Demographic Information (Optional)			Photo Release	
		How were you notified about the public hearing?	Gender	Age Range		Race/Ethnicity
Name <i>Barbara & Doug Rice</i>	Address <i>212 Tran Rd</i> City/Zip <i>Cole 29210</i> Phone <i>803 413 2825</i> Email <i>baberrice@aol.com</i>	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Terry + Cathy Strickland</i>	Address <i>115 Springhaven</i> City/Zip <i>Columbia, SC 29210</i> Phone <i>804.908.1946</i> Email	<input type="checkbox"/> Email <input checked="" type="checkbox"/> Newspaper Ad <input checked="" type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input checked="" type="checkbox"/> Postcard ? <input type="checkbox"/> Website <input type="checkbox"/> Other				<input checked="" type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>Steve Still</i>	Address <i>1832 Luster Ln</i> City/Zip <i>Cole</i> Phone <i>995-2030</i> Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.
Name <i>BOB LEE</i>	Address <i>1364 W SHADY GROVE</i> City/Zip <i>IRMO, 29063</i> Phone Email	<input type="checkbox"/> Email <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Social Media <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Poster/Flier <input type="checkbox"/> Letter <input type="checkbox"/> Postcard <input type="checkbox"/> Website <input type="checkbox"/> Other				<input type="checkbox"/> Yes, I hereby grant SCDOT and its consultants permission to take photographs/video of me and to use the photographs for the sole purpose of marketing, communication and advertising that promotes SCDOT and its consultants and/or any of its operating companies or clients. This may include, but is not limited to, printed and published materials on the SCDOT AND ITS CONSULTANTS or program website. <input type="checkbox"/> No, I do not grant SCDOT and its consultants permission to take photographs/video of me.

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