

☐ **YES** – Please share data from the 2001, 2004, and the 2006 ECA from my state regarding maternal and child health epidemiology and surveillance capacity with CDC & HRSA. Only information pertaining to maternal and child health epidemiology and surveillance capacity will be shared with CDC & HRSA.

☐ **NO** –Do *not* share data from the 2001, 2004, and the 2006 ECA from my state regarding maternal and child health epidemiology and surveillance capacity with CDC & HRSA

☐ **Unsure** – Please contact me to address concerns I have regarding sharing data with CDC & HRSA.

**Name:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Please return this form to CSTE by e-mail or fax:

**CSTE**

**Attention: Jennifer LemmingsKimberly Glenn**

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Fax: 770-458-8516**