

HHS Privacy Impact Assessment/OS ITSC Enterprise E-Mail System (EES)

PIA SUMMARY

1	
<p>The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget.</p>	
<p>Note: If a question or its response is not applicable, please answer "No" to that question.</p>	

2	Summary of PIA Required Questions					
*Is this a new PIA?		No				
If this is an existing PIA, please provide a reason for revision:		PIA Validation				
*1. Date of this Submission:		May 16, 2006				
*2. OPDIV Name:		OS				
*3. Unique Project Identifier (UPI) Number:		009-00-02-00-01-0009-00-404-139				
*4. Privacy Act System of Records (SOR) Number:		N/A				
*5. OMB Information Collection Approval Number:		N/A				
*6. Other Identifying Number(s):		N/A				
*7. System Name:		Enterprise E-Mail System				
*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:						
<table border="1" style="width: 100%;"> <tr> <td colspan="2" style="text-align: center;">Point of Contact Information</td> </tr> <tr> <td>POC Name</td> <td>Alan Smith</td> </tr> </table>			Point of Contact Information		POC Name	Alan Smith
Point of Contact Information						
POC Name	Alan Smith					
*10. Provide an overview of the system:		EES is also known as the "HHSEmail" system				
*13. Indicate if the system is new or an existing one being modified:		Existing				
*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?		No				
<p>Note: This question seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation</p>						
<p>Note: If no IIF is contained in the system, please answer questions 21, 23, 30, 31, 37, 50 and 54, then promote the PIA to the Sr. Privacy Official who will authorize the PIA.</p>						
<p>If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.</p>						

*21. Is the system subject to the Privacy Act?	No
*23. If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
*30. Please describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information. In this description, indicate whether the information contains IIF and whether submission of personal information is voluntary or mandatory:	This system does not collect, maintain or disseminate IIF.
*31. Please describe in detail any processes in place to: • notify and obtain consent from the individuals whose IIF is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of the original collection) • notify and obtain consent from individuals regarding what IIF is being collected from them and how the information will be used or shared:	This system does not collect, maintain or disseminate IIF.
*32. Does the system host a website?	No
*37. Does the website have any information or pages directed at children under the age of thirteen?	No
*50. Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
*54. Briefly describe in detail how the IIF will be secured on the system using administrative, technical, and physical controls.	This system does not collect, maintain or disseminate IIF.

APPROVAL/DEMOTION

1	PIA Reviewer Approval/Promotion or Demotion	
Promotion/Demotion:	Promote	
Comments:	GSS	
Approval/Demotion Point of Contact:	Ruth Doerflein	

2	Senior Official for Privacy Approval/Promotion or Demotion	
Promotion/Demotion:	Promote	
Comments:		

3	OPDIV Senior Official for Privacy or Designee Approval					
Please print the PIA and obtain the endorsement of the reviewing official below. Once the signature has been collected, retain a hard copy for the OPDIV's records. Submitting the PIA will indicate the reviewing official has endorsed it						
This PIA has been reviewed and endorsed by the OPDIV Senior Official for Privacy or Designee (Name and Date):						
Name: _____ Date: _____						
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Name:</td> <td>C. Byrne Huntley</td> </tr> <tr> <td>Date:</td> <td style="text-align: right;">May 30, 2006</td> </tr> </table>			Name:	C. Byrne Huntley	Date:	May 30, 2006
Name:	C. Byrne Huntley					
Date:	May 30, 2006					

4	Department Approval to Publish to the Web
Approved for web publishing	
Date Published: 06/30/2006	

HHS Privacy Impact Assessment/ OS ITSC GSS

PIA SUMMARY

1	<p>The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget.</p> <p>Note: If a question or its response is not applicable, please answer "No" to that question.</p>
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2	Summary of PIA Required Questions					
	*Is this a new PIA?	No				
	If this is an existing PIA, please provide a reason for revision:	PIA Validation				
	*1. Date of this Submission:	May 16, 2006				
	*2. OPDIV Name:	OS				
	*3. Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139				
	*4. Privacy Act System of Records (SOR) Number:	N/A				
	*5. OMB Information Collection Approval Number:	N/A				
	*6. Other Identifying Number(s):	N/A				
	*7. System Name:	OS Backbone LAN				
	*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="background-color: #e0e0e0;">Point of Contact Information</th> </tr> <tr> <td style="width: 60%;">POC Name</td> <td>Alan Smith</td> </tr> </table>		Point of Contact Information		POC Name	Alan Smith
Point of Contact Information						
POC Name	Alan Smith					
	*10. Provide an overview of the system:	The OS Backbone LAN is the network supporting operations of the HHS/OS.				
	*13. Indicate if the system is new or an existing one being modified:	Existing				
	*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No				
	<p>Note: This question seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation</p>					
	<p>Note: If no IIF is contained in the system, please answer questions 21, 23, 30, 31, 37, 50 and 54, then promote the PIA to the Sr. Privacy Official who will authorize the PIA.</p>					
	If this system contains IIF, all remaining questions on the PIA Form Tabs must					

be completed prior to signature and promotion.	
*21. Is the system subject to the Privacy Act?	No
*23. If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
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*32. Does the system host a website?	No
*37. Does the website have any information or pages directed at children under the age of thirteen?	No
*50. Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
*54. Briefly describe in detail how the IIF will be secured on the system using administrative, technical, and physical controls.	This system does not collect, maintain or disseminate IIF.

APPROVAL/DEMOTION

1	PIA Reviewer Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	GSS -- contains no IIF information
Approval/Demotion Point of Contact:	Ruth Doerflein

2	Senior Official for Privacy Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	

3	OPDIV Senior Official for Privacy or Designee Approval		
Please print the PIA and obtain the endorsement of the reviewing official below. Once the signature has been collected, retain a hard copy for the OPDIV's records. Submitting the PIA will indicate the reviewing official has endorsed it			
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Name: _____ Date: _____ -			
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Name:</td> <td>C. Byrne Huntley</td> </tr> </table>		Name:	C. Byrne Huntley
Name:	C. Byrne Huntley		

Date:	May 30, 2006
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4	Department Approval to Publish to the Web	
Approved for web publishing		
Date Published: 06/30/2006		

HHS Privacy Impact Assessment/ OS ITSC HHH computer room

PIA SUMMARY

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	If this is an existing PIA, please provide a reason for revision:	PIA Validation				
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	*2. OPDIV Name:	OS				
	*3. Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139				
	*4. Privacy Act System of Records (SOR) Number:	N/A				
	*5. OMB Information Collection Approval Number:	N/A				
	*6. Other Identifying Number(s):	N/A				
	*7. System Name:	HHH computer room				
	*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
	<table border="1" style="width: 100%; border-collapse: collapse; margin: 10px auto;"> <tr> <th colspan="2" style="background-color: #e0e0e0;">Point of Contact Information</th> </tr> <tr> <td style="width: 70%;">POC Name</td> <td>Alan Smith</td> </tr> </table>		Point of Contact Information		POC Name	Alan Smith
Point of Contact Information						
POC Name	Alan Smith					
	*10. Provide an overview of the system:	The HHH computer room is a data center facility located in HHS's Hubert H. Humphrey building.				
	*13. Indicate if the system is new or an existing one being modified:	Existing				
	*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No				
	<p>Note: This question seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation</p>					
	<p>Note: If no IIF is contained in the system, please answer questions 21, 23, 30, 31, 37, 50 and 54, then promote the PIA to the Sr. Privacy Official who will authorize the PIA.</p>					

If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.	
*21. Is the system subject to the Privacy Act?	No
*23. If the system shares or discloses IIF please specify with whom and for what purpose(s):	This facility does not collect, maintain or disseminate IIF.
*30. Please describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information. In this description, indicate whether the information contains IIF and whether submission of personal information is voluntary or mandatory:	This facility does not collect, maintain or disseminate IIF.
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*32. Does the system host a website?	No
*37. Does the website have any information or pages directed at children under the age of thirteen?	No
*50. Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
*54. Briefly describe in detail how the IIF will be secured on the system using administrative, technical, and physical controls.	This facility does not collect, maintain or disseminate IIF.

APPROVAL/DEMOTION

1	PIA Reviewer Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	GSS -- contains no IIF information
Approval/Demotion Point of Contact:	Ruth Doerflein

2	Senior Official for Privacy Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	

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Name: _____ Date: _____			
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Name:</td> <td>C. Byrne Huntley</td> </tr> </table>		Name:	C. Byrne Huntley
Name:	C. Byrne Huntley		

Date:	May 30, 2006
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4	Department Approval to Publish to the Web	
Approved for web publishing		
Date Published: 06/30/2006		

HHS Privacy Impact Assessment/ OS ITSC HHSNet

PIA SUMMARY

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2	Summary of PIA Required Questions					
	*Is this a new PIA?	No				
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	*1. Date of this Submission:	May 17, 2006				
	*2. OPDIV Name:	OS				
	*3. Unique Project Identifier (UPI) Number:	009-00-02-00-01-0006-00-404-139				
	*4. Privacy Act System of Records (SOR) Number:	N/A				
	*5. OMB Information Collection Approval Number:	N/A				
	*6. Other Identifying Number(s):	N/A				
	*7. System Name:	HHSNet				
	*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
	<table border="1" style="width: 100%; margin-left: 20px;"> <tr> <td colspan="2" style="background-color: #cccccc;">Point of Contact Information</td> </tr> <tr> <td style="width: 70%;">POC Name</td> <td>Alan Smith</td> </tr> </table>		Point of Contact Information		POC Name	Alan Smith
Point of Contact Information						
POC Name	Alan Smith					
	*10. Provide an overview of the system:	HHSNet is the enterprise backbone network that supports the interconnection and Internet access requirement's of the various networks supporting the individual Departmental StaffDivs/OpDivs.				
	*13. Indicate if the system is new or an existing one being modified:	Existing				
	*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No				
	<p>Note: This question seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation</p>					

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*32. Does the system host a website?	No
*37. Does the website have any information or pages directed at children under the age of thirteen?	No
*50. Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
*54. Briefly describe in detail how the IIF will be secured on the system using administrative, technical, and physical controls.	This system does not collect, maintain or disseminate IIF.

APPROVAL/DEMOTION

1	PIA Reviewer Approval/Promotion or Demotion	
Promotion/Demotion:	Promote	
Comments:	GSS -- contains no IIF information	
Approval/Demotion Point of Contact:	Ruth Doerflein	

2	Senior Official for Privacy Approval/Promotion or Demotion	
Promotion/Demotion:	Promote	
Comments:		

3	OPDIV Senior Official for Privacy or Designee Approval	
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This PIA has been reviewed and endorsed by the OPDIV Senior Official for Privacy or Designee (Name and Date):		
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
Name: _____ Date: _____ - _____		

Name:	C. Byrne Huntley
Date:	May 30, 2006

4	Department Approval to Publish to the Web	
Approved for web publishing		
Date Published: 06/30/2006		

HHS Privacy Impact Assessment/ OS ITSC Parklawn computer room

PIA SUMMARY

1	<p>The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget.</p> <p>Note: If a question or its response is not applicable, please answer "No" to that question.</p>
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	*3. Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139				
	*4. Privacy Act System of Records (SOR) Number:	N/A				
	*5. OMB Information Collection Approval Number:	N/A				
	*6. Other Identifying Number(s):	N/A				
	*7. System Name:	Parklawn computer room				
	*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="background-color: #e0e0e0;">Point of Contact Information</td> </tr> <tr> <td style="width: 70%;">POC Name</td> <td>Alan Smith</td> </tr> </table>		Point of Contact Information		POC Name	Alan Smith
Point of Contact Information						
POC Name	Alan Smith					
	*10. Provide an overview of the system:	The Parklawn computer room is a data center facility located in HHS's Parklawn building.				
	*13. Indicate if the system is new or an existing one being modified:	Existing				
	*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No				
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APPROVAL/DEMOTION

1	PIA Reviewer Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	GSS -- contains no IIF information
Approval/Demotion Point of Contact:	Ruth Doerflein

2	Senior Official for Privacy Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	

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Date:	May 30, 2006
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4	Department Approval to Publish to the Web	
Approved for web publishing		
Date Published: 06/30/2006		

HHS Privacy Impact Assessment/ OS ITSC PSC Parklawn GSS

PIA SUMMARY

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	*6. Other Identifying Number(s):	N/A				
	*7. System Name:	PSC Parklawn GSS				
	*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
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Point of Contact Information						
POC Name	Alan Smith					
	*10. Provide an overview of the system:	The PSC Parklawn GSS is a series of networks that support the operations of the Parklawn building-based portion of PSC (including DCP).				
	*13. Indicate if the system is new or an existing one being modified:	Existing				
	*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No				
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*54. Briefly describe in detail how the IIF will be secured on the system using administrative, technical, and physical controls.	This system does not collect, maintain or disseminate IIF.

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Promotion/Demotion:	Promote	
Comments:	GSS -- contains no IIF information	
Approval/Demotion Point of Contact:	Ruth Doerflein	

2	Senior Official for Privacy Approval/Promotion or Demotion	
Promotion/Demotion:	Promote	
Comments:		

3	OPDIV Senior Official for Privacy or Designee Approval	
Please print the PIA and obtain the endorsement of the reviewing official below. Once the signature has been collected, retain a hard copy for the OPDIV's records. Submitting the PIA will indicate the reviewing official has endorsed it		
This PIA has been reviewed and endorsed by the OPDIV Senior Official for Privacy or Designee (Name and Date):		
Name: _____ Date: _____		

Name:	C. Byrne Huntley
Date:	May 30, 2006

4	Department Approval to Publish to the Web	
Approved for web publishing		
Date Published: 06/30/2006		

HHS Privacy Impact Assessment/ OS ITSC SSC LAN

PIA SUMMARY

1	<p>The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget.</p> <p>Note: If a question or its response is not applicable, please answer "No" to that question.</p>
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2	Summary of PIA Required Questions					
	*Is this a new PIA?	No				
	If this is an existing PIA, please provide a reason for revision:	PIA Validation				
	*1. Date of this Submission:	May 17, 2006				
	*2. OPDIV Name:	OS				
	*3. Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139				
	*4. Privacy Act System of Records (SOR) Number:	N/A				
	*5. OMB Information Collection Approval Number:	N/A				
	*6. Other Identifying Number(s):	N/A				
	*7. System Name:	PSC SSC LAN				
	*9. System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:					
	<table border="1" style="width: 100%; margin-left: 20px;"> <tr> <td colspan="2" style="background-color: #cccccc;">Point of Contact Information</td> </tr> <tr> <td style="width: 70%;">POC Name</td> <td>Alan Smith</td> </tr> </table>		Point of Contact Information		POC Name	Alan Smith
Point of Contact Information						
POC Name	Alan Smith					
	*10. Provide an overview of the system:	The PSC SSC LAN is a local area network supporting the operations of the Silver Spring Center based portion of the HHS/PSC (HRS).				
	*13. Indicate if the system is new or an existing one being modified:	Existing				
	*17. Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No				
	<p>Note: This question seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation</p>					
	<p>Note: If no IIF is contained in the system, please answer questions 21, 23, 30, 31, 37, 50 and 54, then promote the PIA to the Sr. Privacy Official who will authorize the PIA.</p>					

If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.	
*21. Is the system subject to the Privacy Act?	No
*23. If the system shares or discloses IIF please specify with whom and for what purpose(s):	The system does not collect, maintain or disseminate IIF.
*30. Please describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information. In this description, indicate whether the information contains IIF and whether submission of personal information is voluntary or mandatory:	The system does not collect, maintain or disseminate IIF.
*31. Please describe in detail any processes in place to: <ul style="list-style-type: none"> • notify and obtain consent from the individuals whose IIF is in the system when major changes occur to the system (e.g., disclosure and/or data uses have changed since the notice at the time of the original collection) • notify and obtain consent from individuals regarding what IIF is being collected from them and how the information will be used or shared: 	The system does not collect, maintain or disseminate IIF.
*32. Does the system host a website?	No
*37. Does the website have any information or pages directed at children under the age of thirteen?	No
*50. Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
*54. Briefly describe in detail how the IIF will be secured on the system using administrative, technical, and physical controls.	The system does not collect, maintain or disseminate IIF.

APPROVAL/DEMOTION

1	PIA Reviewer Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	GSS -- contains no IIF information
Approval/Demotion Point of Contact:	Ruth Doerflein

2	Senior Official for Privacy Approval/Promotion or Demotion
Promotion/Demotion:	Promote
Comments:	

3	OPDIV Senior Official for Privacy or Designee Approval		
Please print the PIA and obtain the endorsement of the reviewing official below. Once the signature has been collected, retain a hard copy for the OPDIV's records. Submitting the PIA will indicate the reviewing official has endorsed it			
This PIA has been reviewed and endorsed by the OPDIV Senior Official for Privacy or Designee (Name and Date):			
Name: _____ Date: _____ -			
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Name:</td> <td>C. Byrne Huntley</td> </tr> </table>		Name:	C. Byrne Huntley
Name:	C. Byrne Huntley		

Date:	May 30, 2006
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