Project Title

I attest I have read and acknowledged sections A-J of the Agreement for Release of Data

Read and Acknowledged (for Primary Investigator and all persons who will analyze data directly)

Investigator/Analyst Signature	Name	Date
Investigator/Analyst Signature	Name	Date
Investigator/Analyst Signature	Name	Date
Investigator/Analyst Signature	Name	Date
Investigator/Analyst Signature	Name	Date
Investigator/Analyst Signature	Name	Date
Investigator/Analyst Signature	Name	Date
Investigator/Analyst Signature	Name	Date

USRDS Contracting Officer Representative: Kevin C. Abbott, MD, NIDDK, NIH

USRDS Contracting Officer Representative Signature