## 02 INF 16 ATTACHMENT B

## THE NEW YORK STATE OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE PUBLIC HEARING

TO PROVIDE FOR PUBLIC COMMENT ON NEW YORK STATE'S PROPOSED 2002-2003 HOME ENERGY ASSISTANCE PROGRAM (HEAP) STATE PLAN

New York City, Wednesday, July 10, 2002, from 11:00 A.M. to 12:30 P.M., 80 Maiden Lane, New York, New York 10038, 6th Floor, Room 603B.

Albany, New York, Thursday, July 11, 2002, from 11:00 A.M. to 12:30 P.M., 90 State street, Albany, New York 12207, 6th Floor, Large Conference Room, Cornell University Suite.

Persons wishing to present their views at any of these hearings are requested to complete this registration form as soon as possible and mail to:

Telephone: 1 (800) 343-8859

Extension 3-0332

Mr. Charles Giambalvo
New York State Office of
Temporary and Disability Assistance
Western Regional Team
40 North Pearl Street - 11A
Albany, New York 12243

The registration form may also be faxed to Charles Giambalvo (518) 474-9347 or (518) 474-5281.

To assure your pre-registration, please respond three days prior to the scheduled hearing date, or call the above number if you have any questions.

I plan to attend the public h	nearing in (please check):
New York City, New Yor	rk (July 10, 2002)
Albany, New York (July	y 11, 2002)
	ement at the hearing. I will limit my statement to d I will provide three copies of my prepared
STATEMENTS SHOULD BE LIMITED 2003 HOME ENERGY ASSISTANCE I	TO COMMENTS ON THE NEW YORK STATE PROPOSED 2002-PROGRAM (HEAP) PLAN.
NOTE: There will not be any	photocopying facilities available at the hearing.
NAME	
TELEPHONE	
TITLE	
AFFILIATION	
ADDRESS	