Paper Information Form

OTC Paper Number: _____ **Paper Title:** _____

_____

☐ **AUTHOR 1:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 2:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 3:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 4:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 5:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 6:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

Paper Information Form (continued)

OTC Paper Number: _____ **Paper Title:** _____

_____

☐ **AUTHOR 7:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 8:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 9:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 10:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 11:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 12:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

Paper Information Form (continued)

OTC Paper Number: _____ **Paper Title:** _____

_____

☐ **AUTHOR 13:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 14:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 15:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 16:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 17:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____

☐ **AUTHOR 18:** _____
First *(Forename)* Middle Last *(Family Name)*

Company Affiliation: _____

Complete Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Briefly describe nature of author's contribution: _____