



Directory Listing

Please print all information — Return by Fax to:
1-202-383-2440 or 1-202-383-2439

*COMPANY NAME: _____

*Address: _____

*City/State/Prov.: _____ *Country: _____ *Postal Code: _____

*Telephone: _____ *Fax: _____

*E-Mail: _____ Web: http:// _____

Annual Sales (U.S. dollars): _____ Number of Employees: _____

Personnel: Please provide the names and titles of the top managers with **responsibility** for each of the following:

Chief Executive _____
(LAST NAME/First Name) (Title)

Homeland Security _____
(LAST NAME/First Name) (Title)

Purchasing _____
(LAST NAME/First Name) (Title)

Sales/Marketing _____
(LAST NAME/First Name) (Title)

In what market(s) is your organization doing business?

- Public Sector Only Private Sector Only Both Public & Private Sector

Please provide a brief description of your company's homeland security activities: _____

Please check this box if you re interested in advertising.

Authorization:		
Print Name	Title	Contact E-Mail Address

* Required field

Directory

COMPANY NAME: _____

Please review the following categories and check the applicable boxes to indicate whether your company provides products or services in that area. Check all that apply.

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Border Security <input type="checkbox"/> Communications <ul style="list-style-type: none"> __ Strategic __ Tactical <input type="checkbox"/> Consulting/Special Services <ul style="list-style-type: none"> __ Engineering/Design/Architecture __ Financial __ Legal __ Risk Analysis/Management <input type="checkbox"/> Corporate/Industrial Security <ul style="list-style-type: none"> __ Executive/Personnel __ Facility/Asset __ Background Checks/HR <input type="checkbox"/> Education/Training <ul style="list-style-type: none"> __ Degree/Executive Programs __ First Responders __ Site Security/Access Control <input type="checkbox"/> Emergency Management <ul style="list-style-type: none"> __ Preparedness __ Recovery __ Response | <ul style="list-style-type: none"> <input type="checkbox"/> Information Technology <ul style="list-style-type: none"> __ Information Assurance __ System Integration <input type="checkbox"/> Infrastructure Security/Modification <ul style="list-style-type: none"> __ Construction __ Energy Production/Distribution Facilities __ Public Facilities __ Utilities <input type="checkbox"/> Law Enforcement <ul style="list-style-type: none"> __ Safety/Security-related Equipment __ Intelligence Gathering <input type="checkbox"/> Public Health <ul style="list-style-type: none"> __ Food Production/Potable Water __ Nuclear/Chemical/Biological/Radiological <input type="checkbox"/> Transportation Security <ul style="list-style-type: none"> <i>Aviation</i> <ul style="list-style-type: none"> __ Aircraft __ Airport __ Flight Operations <i>Ground</i> <ul style="list-style-type: none"> __ Rail/Subway __ Roads/Highways/Trucking <i>Maritime</i> <ul style="list-style-type: none"> __ Seaport |
|--|---|
- Other** (please indicate): _____