TO: Assistant Director for State Agreements Program

SUBJECT: RESPONSE TO ALL AGREEMENT STATES LETTER (SP-92-030)

Please check one of the following:

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0 We acknowledge receipt of the referenced letter and have no comments.

- 0 We acknowledge receipt of the referenced letter and providing comments which are attached. {Short responses may be faxed to (301) 504-2395.}
- 0 Other (please explain under comments).

Comments (use additional sheets as appropriate):

Please complete the following information:

aller the Signature: Name: Maher Title: Thesice Sugarvisor thealth 3/19/92 Date:

State Programs Contact: Jim Myers State Agreements Letter Number: (SP-92-030) Response Due: March 14, 1992

PLEASE TYPE OR PRINT YOUR STATE ABREVIATION HERE:

NC