



**U.S. REPATRIATION PROGRAM**  
**ATTACHMENT B**  
**STATE REPATRIATION PROGRAM COORDINATORS CONTACT FORM**  
Designated by the Governor or State Authorized Staff

**STATE OF** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**State Non-Emergency Repatriation Coordinator:**

*Main Contact*

**Name:** \_\_\_\_\_  
**Position:** \_\_\_\_\_  
**Agency:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Emergency Number:** \_\_\_\_\_  
**FAX:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**Website:** \_\_\_\_\_

*Back-Up Contact*

**Name:** \_\_\_\_\_  
**Position:** \_\_\_\_\_  
**Agency:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Emergency Number:** \_\_\_\_\_  
**FAX:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**Website:** \_\_\_\_\_

**State Emergency & Group Repatriation Coordinator**

*Main Contact*

**Name:** \_\_\_\_\_  
**Position:** \_\_\_\_\_  
**Agency:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Emergency Number:** \_\_\_\_\_  
**FAX:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**Website:** \_\_\_\_\_

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**Agency:** \_\_\_\_\_  
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**Emergency Number:** \_\_\_\_\_  
**FAX:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**Website:** \_\_\_\_\_

**State Emergency Operation Center Tel.:** \_\_\_\_\_  
**State Emergency Operation Center Fax:** \_\_\_\_\_  
**State Emergency Operation Center E-mail:** \_\_\_\_\_

**Federal Contact:**

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