



2017 OTC 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: _____



16 OTC 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: _____



16 OTC 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: _____