



RECORD OF ATTENDANCE

I, _____, on behalf of _____
(Print Name) **(Company Name)**

Attended the South Dakota One Call Damage Prevention Meeting at _____ on
(City Name)

_____ In accordance with Complaint Docket OC _____.
(Date)

(Signed)

Certified by:

Codi Gregg **(Date)**
Deputy Director
South Dakota One Call / South Dakota 811

PLEASE REMEMBER TO BRING 2 COPIES OF FORM TO THE MEETING.