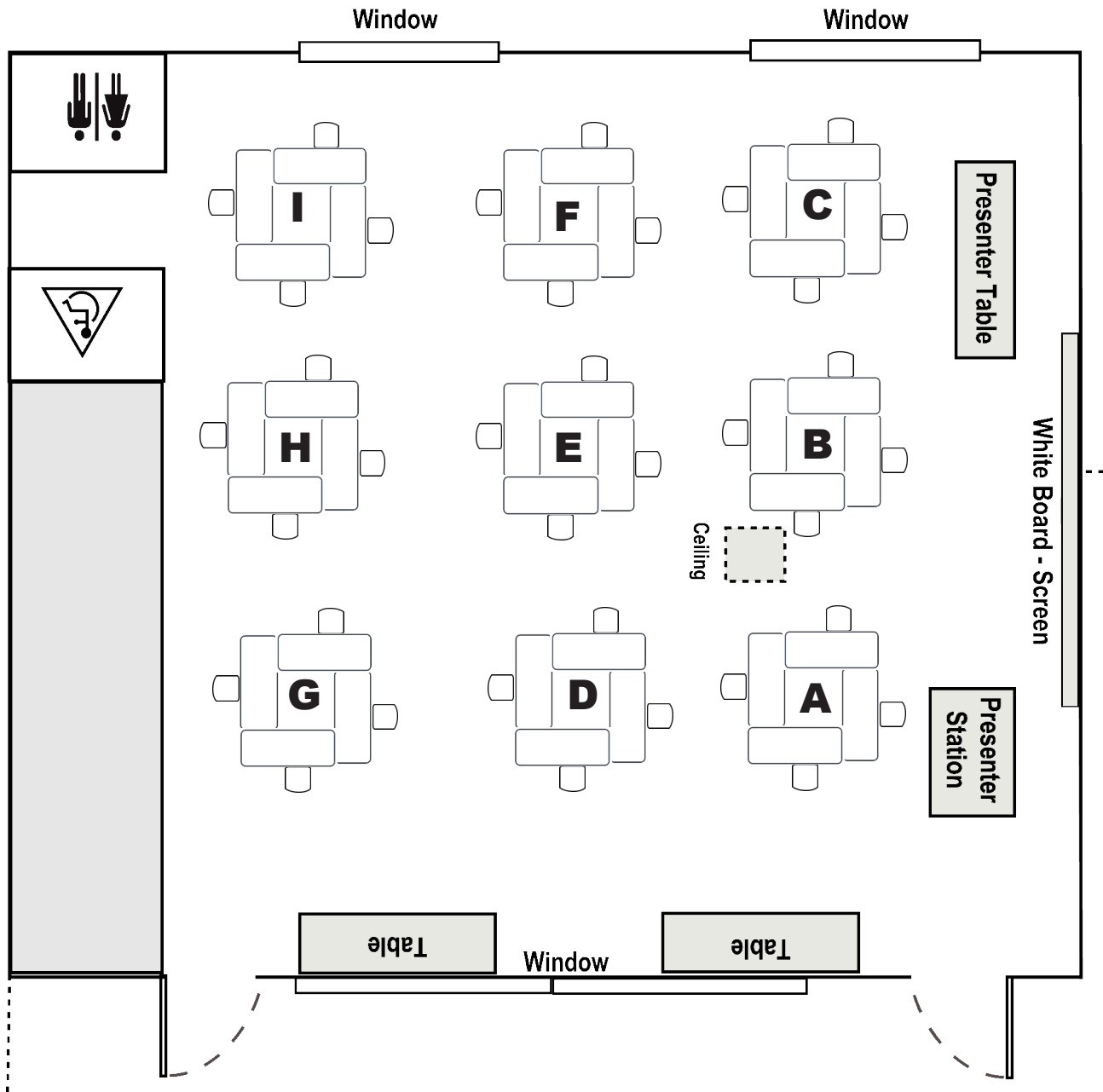


Contact Tracing Room Schematic

Annex B - Donut for 36

Event name: _____ Date: _____ Time range: _____



Meeting room furniture is set to enable contact tracing. DO NOT CHANGE.

Masks are required indoors.

Contact Tracing Room Schematic

Annex B – Donut for 36

Event name: _____ Date: _____ Time range: _____

Check the table letter on the front of this form and print participant names by table/group below:

	Table Group	Participant		Table Group	Participant
1	A		29	H	
2	A		30	H	
3	A		31	H	
4	A		32	H	
5	B		33	I	
6	B		34	I	
7	B		35	I	
8	B		36	I	
9	C				
10	C			Presenter	
11	C			Admin	
12	C				
13	D				
14	D				
15	D				
16	D				
17	E				
18	E				
19	E				
20	E				
21	F				
22	F				
23	F				
24	F				
25	G				
26	G				EXAMPLE
27	G		1	A	Bob Mueller
28	G		2	B	Yolanda Rogers