



EMERGENCY DISCLOSURE FORM

Pursuant to 18 U.S.C. § 2702 (b) (7) and § 2702 (c) and the Chazy Westport Communications and its wholly owned subsidiary Westelcom Networks Inc.'s Privacy Policy, Chazy Westport Communications and its wholly owned subsidiary Westelcom Networks Inc. may exercise its discretion in providing relevant data after reviewing the provided information below. Please provide as much information in order to enable the Security team to conduct an appropriate search.

1. Describe the nature of the emergency (i.e. potential bodily harm, crime being committed):

2. Provide the identification of all user involved (customer number, email address, screen name or other appropriate identifier):

3. Provide the exact location(s) of the evidence related to the described emergency:

I, _____, attest that the above-mentioned facts are true and accurate to the best of
(Printed Name of authorized Officer)
my knowledge.

Signature and Badge #

Date

LAW ENFORCEMENT USE ONLY