

PUBLIC MEETING TMAC RESOURCES INC.
Cambridge Bay, Nunavut October 25, 2018
Registration Form Session Day Two

No.	First Name	Last Name	Organization/ Address	Phone	Fax	E-mail
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						
31.						

PUBLIC MEETING TMAC RESOURCES INC.
Cambridge Bay, Nunavut October 25, 2018
Registration Form Session Day Two

No.	First Name	Last Name	Organization/ Address	Phone	Fax	E-mail
32.						
33.						
34.						
35.						
36.						
37.						
38.						
39.						
40.						
41.						
42.						
43.						
44.						
45.						
46.						
47.						
48.						
49.						
50.						
51.						
52.						
53.						
54.						
55.						
56.						
57.						
58.						
59.						
60.						
61.						
62.						

PUBLIC MEETING TMAC RESOURCES INC.
Cambridge Bay, Nunavut October 25, 2018
Registration Form Session Day Two

No.	First Name	Last Name	Organization/ Address	Phone	Fax	E-mail
63.						
64.						
65.						
66.						
67.						
68.						
69.						
70.						
71.						
72.						
73.						
74.						
75.						
76.						
77.						
78.						
79.						
80.						
81.						
82.						
83.						
84.						
85.						
86.						
87.						
88.						
89.						
90.						
91.						
92.						
93.						

PUBLIC MEETING TMAC RESOURCES INC.
Cambridge Bay, Nunavut October 25, 2018
Registration Form Session Day Two

No.	First Name	Last Name	Organization/ Address	Phone	Fax	E-mail
94.						
95.						
96.						
97.						
98.						
99.						
100.						
101.						
102.						
103.						
104.						
105.						
106.						
107.						
108.						
109.						
110.						
111.						
112.						
113.						
114.						
115.						
116.						
117.						
118.						
119.						
120.						
121.						
122.						
123.						
124.						

PUBLIC MEETING TMAC RESOURCES INC.
Cambridge Bay, Nunavut October 25, 2018
Registration Form Session Day Two

No.	First Name	Last Name	Organization/ Address	Phone	Fax	E-mail
125.						
126.						