

**ADVISORY COMMITTEE ON
UNDERRIDE PROTECTION (ACUP)
Statement of Concurrence / Non-Concurrence**

Voting Member Name	Melinda Carter
Voting Member Organization	NASEMSO - Trauma Mgrs. Council
Stakeholder Representation	Emergency Medical Service Providers

As a voting member and full participant of ACUP, I hereby acknowledge that I have reviewed the ACUP Final Report and make the following declaration regarding the Report:

1. Concur with the Final Report, Section I ("Majority Report"), as written

Voting Member Signature Melinda Carter Date: 6-27-24

2. Concur with the Final Report, Section II ("Minority Report"), as written

Voting Member Signature _____ Date: _____

3. Concur with the Final Report,

- Section I ("Majority Report"),
- Section II ("Minority Report"),

as written with the following exception(s): (Fully explain the areas of exception below, providing specific page number if appropriate. Submission of additional pages is permitted.)

Voting Member Signature _____

Date:

4. Non-Concur with both Sections I and II of the Final Report as written. Letter of Dissent must be provided.

Voting Member Signature _____

Date:
