

ATTACHMENT C

**Submission Contact Information  
Local Workforce Investment Board**

**Fiscal Year 2006 Annual Workforce Development Business Plan  
and  
Memorandum of Understanding for Title I,  
Wagner-Peyser and Associated Programs Funded through DCS**

**GREATER NEW BEDFORD WORKFORCE INVESTMENT BOARD**

**Please list the contact information for the individual you designate as your primary contact person for the submission of your area's FY 2006 Annual Workforce Development Business Plan. The person named will be the individual that state reviewers will contact if there are questions about or additional information needed in order to complete the review of your plan.**

**Principal Contact**

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