



## We want your feedback!

Name: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Email Address: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Do you want to receive updates from the Project Team?** Circle one.

Yes | Email Updates      Yes | Text Updates      Yes | Both      No | Neither

**How often do you drive this section of I-70?** Circle one.

Daily      2-3 times/week      Weekly      A few times/month      Rarely



**Improvements expected as part of Contract 1 are expected to include added travel lanes, interchange modifications, and pavement replacement.**

Do you have additional feedback regarding the improvements identified?

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