

SHANGHAI HEALTH STUDY

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March XX, 2004

- DRAFT -

Dear Scientific Review Panel Member,

The American Petroleum Institute (API), on behalf of the Benzene Health Research Consortium, cordially requests your attendance to the 2003 Annual Shanghai Health Study Meeting. The main goal of the meeting is to bring together the principal investigators, independent review panel members, funding company representatives, and study administrators to review study progress. Therefore, as a member of the [Scientific Review Panel, ERP, presenter], your attendance is critical for this meeting to be a success. [for presenters – Therefore as a researcher working directly with the study, your presence is important to the meeting's success. API invites you to attend the conference and make a presentation during the [insert] session. We will contact you in the near future with a suggested topic and other details]

The meeting will take place at the Asilomar Conference Center in Monterey, California on August 17th – 19th, 2004. Rooms at Asilomar are available Tuesday, August 17th thru noon (1200) on Friday, August 20th. [International travelers – replace previous sentence with the following] Rooms at Asilomar are available only for the nights of Tuesday, August 17 thru noon (1200) on Friday, August 20th. However, to accommodate international travelers, expenses will be reimbursed from Sunday, August 15 thru Friday, August 20. Information on Sunday and Monday night accommodations in Monterey will be provided in the information package to be supplied in the near future.

For planning purposes, please fill out and return to API the attached registration form by April 15, 2004. Thank you for your important contribution to the Shanghai Health Study and for your attendance at the first annual meeting.

Best regards,

Edward H. Murphy
Group Director, Industry Operations and Downstream
The American Petroleum Institute

*Administrative support provided by The American Petroleum Institute
1220 L Street, Northwest
Washington, DC 20005-4070*

SHELL-MCCLURG-056184

SHANGHAI HEALTH STUDY

ANNUAL MEETING 17 - 19 AUGUST 2004

RESERVATION / REGISTRATION REQUEST

Suffix: _____

First Name: _____

Last Name: _____

Nickname for Badge (if any): _____

Company or Affiliation: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

I will arrive on: _____ Depart on: _____

I will be accompanied by:

First and Last Name: _____

(If you have children accompanying you, please supply their age)

I/We will attend the Welcome Reception (Tuesday evening) and Cookout (Wednesday evening): Yes (No. of adults ____ No. of children ____). I will not attend the Welcome Reception and Cookout: ____

I have/do not have special needs. Please let us know how we can assist.

Please email or fax no later than April 15 to 202-682-8222 -- no cover sheet necessary.
