

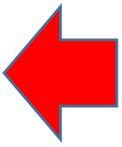
# Printing Instructions

## Comment Card Image Files:

The survey form is available in a two-page PDF format that can be opened and printed using the Adobe Acrobat® Reader®. It is important to customize the image files as per instructions below before printing them.

## Instructions for Customizing Image Files:

- 1) On the AGENCY DISCLOSURE STATEMENT page, “Responses should be directed to:” your project. The default address is USACE – IWR because an address is required to obtain the OMB approval. “USACE – IWR, 7701 Telegraph RD, Alexandria VA 22315” should be replaced by your project name and project address as per instructions below.

<b>AGENCY DISCLOSURE STATEMENT</b>	<b>OMB Control #:0710-0019, Exp: 02/28/2023</b>				
The public reporting burden for this collection of information, 0710-0019, is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at <a href="mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil">whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil</a> . Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.					
PLEASE DO NOT RESPOND TO THE ABOVE ADDRESS Responses should be directed to:					
<table border="1"><tr><td>Natural Resources Support Program</td></tr><tr><td>USACE - IWR - Casey Building</td></tr><tr><td>7701 Telegraph RD</td></tr><tr><td>Alexandria VA 22315</td></tr></table>	Natural Resources Support Program	USACE - IWR - Casey Building	7701 Telegraph RD	Alexandria VA 22315	
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- 2) Please type in “Recreation Area” (or Visitor Center) name and “Project” name. You may select the survey protocol, and type in the date.

**US Army Corps of Engineers**

**Visitor Comment Card**

We would like to know about your visit. **Your response is voluntary and not required.** This information will be used to improve the quality of information, facilities, and services at this recreation area.

OMB Control #: 0710-0019 Exp: 02/28/2023

**Scheduled Survey:**  
 Day-Use  
 Camping  
 All Visitors

**Other Protocols:**  
 Solicited  
 Self-Service  
 Other

Today's Date: \_\_\_/\_\_\_/\_\_\_ (MM DD YYYY)

Please help us serve you better on future visits to:

**Recreation Area:** \_\_\_\_\_ **Project:** \_\_\_\_\_

**Previous visits to this recreation area:**  
 1. Is this your first visit to this recreation area? (Choose one)  Yes  No  
 2. If no, how many other times have you visited this area in the last 12 months? \_\_\_\_\_ (Enter number)

**Use of park facilities at this area:**  
 Did you do any of the following *at this recreation area during your current visit?* (Check all that apply)  
 Stay overnight in campground  Use restrooms or showers  
 Use swimming beach  Use a recreational trail  
 Use picnic facilities  Use boat or facilities at a marina  
 Launch a boat  Other \_\_\_\_\_

**How did you hear about this recreation area?**  
 (check all that apply)  
 Family/Friend  Map/brochure  www.corpslakes.us  
 www.recreation.gov  www.reserveamerica.com  
 Other website \_\_\_\_\_  Highway/Road Signs  
 info/staff at local business  Info/staff at local motel  
 Newspaper/magazine article  School class/program  
 Welcome center/chamber of commerce

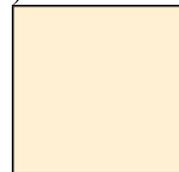
**Visitor fees:**  
 1. Did you use a Senior Pass, Access Pass or Annual Day-Use Pass to offset the fees charged at this area? (Choose one)  Yes  No  Does Not Apply  
 2. Did you pay a fee to enter or use this area during your current visit? (Choose one)  Yes  No  Not Sure

**About yourself:**  
 1. Home postal or ZIP code: \_\_\_\_\_ (write in)  
 (Choose one for each item below)  
 2. You live in:  U. S.  Canada  Mexico  Other  
 3. Age:  Under 25  25-44  45-61  62+  
 4. Gender:  Female  Male  
 5. Are you Hispanic or Latino?  Yes  No  
 6. What is your Race? (Mark one or more)  
 American Indian or Alaska Native  Asian  
 Black or African American  White  
 Native Hawaiian or other Pacific Islander

**Recommended Paper:**

Each comment card will require one 8-½ by 11-in. sheet of paper or card stock. Card stock is recommended because it gives a professional look to the printed comment card, and its rigidity makes it more convenient for the ranger to administer and the visitor to fill out. Card stock is readily available at office supply and department stores.

- **Size:** 8-½ by 11-in.
- **Weight:** 90-to-110 lb card stock (standard printer paper is typically 20-lb wt)
- **Color:** Readability may vary with the background color of the card stock. Ivory or cream-colored card stock provides excellent contrast against the black text, making it easy to read.



**Printing Procedure:**

- Open the customized comment card image file using Adobe Acrobat® Reader®.
- Load 8-½ by 11-in. card stock into the printer supply tray.
- The first page of the image file contains a message of thanks to the visitor and a required OMB survey notice. Print this page on one side of the card stock. **TIP:** The survey form is formatted to print to within ¼ inch of the edge of the card stock. When printing, ensure

that the "Page Scaling" option is set to "none". Choosing any other value will cause the document to be reformatted for printing. This may result in a less desirable printed form.

- Remove the printed card stock, flip it end-for-end (top to bottom) and reinsert into printer supply tray.
- Then print the second page of the PDF file, then check to ensure that the two sides are oriented correctly relative to each other.

**TIP:** Test print both sides of one card to ensure that the front and back sides of the card are correctly oriented relative to each other as pictured below. To confirm, fold the card in half so that the survey side is hidden from view inside the fold. Orient so the thank you message is visible and readable. You should now be able to open the card so that the survey is readable without having to rotate the card 180°.



Thank You!

US Army Corps of Engineers

Your thoughtful feedback today will help make future visits here more enjoyable and worthwhile for everyone.

Are you interested in learning more about recreation opportunities on Corps of Engineers lakes?

Visit our website at [www.Corpslakes.us](http://www.Corpslakes.us)



### Visitor Comment Card

We would like to know about your visit. Your response is voluntary and not required. This information will be used to improve the quality of information, facilities, and services at this recreation area.

OMB Control #: 0710-0019 Exp: 02/28/2023

**Scheduled Survey:**  
 Day-Use  
 Camping  
 All Visitors

**Other Protocols:**  
 Solicited  
 Self-Service  
 Other

Today's Date:  /  /

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Please help us serve you better on future visits to:

**Recreation Area:**

**Project:**

**Previous visits to this recreation area:**

1. Is this your first visit to this recreation area? (Choose one)  Yes  No

2. If no, how many other times have you visited this area in the last 12 months? (Enter number)

**Use of park facilities at this area:**

Did you do any of the following at this recreation area during your current visit? (Check all that apply)

Stay overnight in campground  Use restrooms or showers

Use swimming beach  Use a recreational trail

Use picnic facilities  Use boat or facilities at a marina

Launch a boat  Other \_\_\_\_\_

**How did you hear about this recreation area?** (check all that apply)

Family/Friend  Map/brochure  [www.corpslakes.us](http://www.corpslakes.us)

[www.recreation.gov](http://www.recreation.gov)  [www.reserveamerica.com](http://www.reserveamerica.com)

Other website  Highway/Road Signs

Info/staff at local business  Info/staff at local motel

Newspaper/magazine article  School class/program

Welcome center/chamber of commerce

**Visitor fees:**

1. Did you use a Senior Pass, Access Pass or Annual Day-Use Pass to offset the fees charged at this area? (Choose one)  Yes  No  Does Not Apply

2. Did you pay a fee to enter or use this area during your current visit? (Choose one)  Yes  No  Not Sure

**About yourself:**

1. Home postal or ZIP code: \_\_\_\_\_ (write in)

(Choose one for each item below)

2. You live in:  U. S.  Canada  Mexico  Other

3. Age:  Under 25  25-44  45-61  62+

4. Gender:  Female  Male

5. Are you Hispanic or Latino?  Yes  No

6. What is your Race? (Mark one or more)

American Indian or Alaska Native  Asian

Black or African American  White

Native Hawaiian or other Pacific Islander

**For your current visit, please rate each of the following:** (Check one box for each item)

Item	Very Good	Good	Not Good Not Poor	Poor	Very Poor	Does Not Apply
<b>Facilities:</b>						
Suitability of park facilities for my recreational equipment and activities	<input type="checkbox"/>					
Restroom cleanliness and availability of conveniences	<input type="checkbox"/>					
Appearance of park grounds	<input type="checkbox"/>					
Adequacy of signs providing directions and information	<input type="checkbox"/>					
Parking space availability during this visit	<input type="checkbox"/>					
Condition of roads and parking areas in the park	<input type="checkbox"/>					
<b>Employees:</b>						
Availability of park rangers and staff	<input type="checkbox"/>					
Helpfulness of park rangers and staff	<input type="checkbox"/>					
<b>Environmental Setting:</b>						
Attractiveness of surrounding scenery and landscape	<input type="checkbox"/>					
Quality of land and water resources for my activities	<input type="checkbox"/>					
<b>Overall:</b>						
Waiting times needed to access park facilities and services	<input type="checkbox"/>					
Feeling of safety and security in the park	<input type="checkbox"/>					
Value received for any visitor fees paid	<input type="checkbox"/>					
Overall satisfaction with your visit to this area	<input type="checkbox"/>					

What **improvements** would you like to see in this area? (Describe. **Do not provide personally identifiable information (PII)**)

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What did you **like most** about this area? (Describe. **Do not provide personally identifiable information (PII)**)

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