

**ILLINOIS TERRORISM TASK FORCE
STARCOM21 QUESTIONNAIRE**

Agency Name: _____

County: _____

Point of Contact: _____

Address: _____

Telephone Number: _____

Fax Number: _____

E-mail address: _____

1. My public safety agency understands the guidelines and wishes to receive a STARCOM21 radio from the ITTF under the conditions outlined in the attached letter. My agency prefers:

- The Motorola XTL5000 Mobile radio with encryption**
- The Motorola XTL5000 Base radio with encryption**

2. My agency is not interested in participating in this ITTF initiative for the following reason:

SIGNATURE

DATE