

**LIST OF PARTICIPANTS**

**Format for Reporting Projected Participation**

**Project or Activity Designation and Number (if applicable):**

**Project or Activity Title:** Mosquitoes, Disease & Public Health

**Administrative Advisor:** Brad Hillman

Participant Name, Office Phone Number, And E-mail address	Institution And Department	Research						Extension		Objectives				
		CRIS Codes			Personnel			FTE	Program	1	2	3	4	5
		RPA	SOI	FOS	SY	PY	TY							
Randy Gaugler 732/932-9341 gaugler@rci.rutgers.edu	New Jersey AES Dept. Entomology	721	3110	1130	0.2	1.0	0.5	0.1	Health	x	x	x	x	x
Dina Fonseca 732/932-9341 dinafons@rci.rutgers.edu	New Jersey AES Dept. Entomology	721	3110	1130	0.2	1.0	0.5	0.1	Health	x	x			x
Ted Andreadis 203/974-8510 Theodore.Andreadis@po.state.ct.us	Connecticut AES Dept. Entomology	721	3110	1130	0.2	1.0	0.5	---	-----	x	x	x	x	x
Jack Gingrich 302/831-1308 gingrich@udel.edu	Delaware AES Dept. Entomology	721	3110	1130	0.2	--	--	---	-----	x	x	x	x	x
Laura Harrington 607/255-4475 lch27@cornell.edu	New York AES Dept. Entomology	721	3110	1130	0.15	0.5	0.2	---	-----	x	x	x	x	x
<b>Total SY, PY, TY and FTE</b>		X	X	X					X	X	X	X	X	X

Approved \_\_\_\_\_ Date: \_\_\_\_\_  
Department Head

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Director, Agricultural Experiment Station