ONTARIO POLICE DEPARTMENT CHIEF'S ADVISORY COUNCIL (OPD-CAC)

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	(Print name)	
Gender: M	F (Check one)	
Work Address: _		Work #
Name of Busines	ss:	
Check One:	Owner () Partno	er () Employee ()
Home Address:		
	Ontario, Oregon 979	
Home Telephone	e: ()	
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Please explain ye	our reason and desire for s	serving on the OPD-CAC:
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