

Signature Page: Please fill out and sign. Then either scan and email to deltaactioncommittee@gmail.com
 OR take a photo and text to (530) 570-9641
Please return by 12:00 noon on Thursday, April 16

Resident's Name and Signature	Resident's Residence and Mailing Address
Signature _____ Print Name _____ Email Address _____	Physical Address _____ Clarksburg, CA, 95612 Mailing Address _____ Clarksburg, CA, 95612
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