



COUNTY OF LAKE
 Department of Agriculture
 Department of Weights & Measures
 883 Lakeport Blvd.
 Lakeport CA 95453
 Phone: (707) 263-0217
 FAX: (707) 263-1052
 DEPARTMENT OF AGRICULTURE

STEVEN HAJIK
 Agricultural Commissioner
 Sealer of Weights & Measures
 and Measures

Key Participants Supplemental Page

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B. Key Participants (Everyone listed on background check)

Participant Name: _____
 Participant Position: _____
 Physical Address: _____
 Mailing Address: _____

Phone Number: _____
 City/State: _____ Zip: _____
 City/State: _____ Zip: _____

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