

Fax Cover Sheet

Date:				Sender:			
To:	Bill Brautigam			Office Name:			
Office Name:	APD Central Office			Address:			
Address:	500 Summer St NE E12			City:			
City:	Salem			State:			Zip:
State:	OR	Zip:	97301	Phone No.:			
Phone No.:	503.947.5204			Fax No.:			
Fax No.:	503.378.7823			Total Pages:			
Re:	Application for hardship waiver						

Potential APS case

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