

## A Public Document

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
County of Alameda			
<b>Division, Department, or Region</b> <i>(if applicable)</i>			
Board of Supervisors			
<b>Street Address</b>		<input type="checkbox"/> <b>Amendment</b> <i>(Must provide explanation in Part 3.)</i>  <b>Date of Original Filing:</b> _____ <i>(month, day, year)</i>	
1221 Oak Street, Suite 536			
<b>Designated Agency Contact</b> <i>(Name, Title)</i>			
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