THE COALITION Poll Closing Observation Project Miami-Dade 2006 Outreach Appointment Form

Name of Organization						
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Contact Name						
Contact Phone						
Contact E-Mail						
Date Contacted						
By Whom				<i>H</i>		
Result						

Date of Appointment		Time				
Who will speak for THE COALIT	ION		MANUFACTOR CONTROL CON	COCTO PHOTO HONOR CONTROL CONT		
# of Attendees Anticipated						
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Confirm by: Date	_ Done	_ Entered o	on Data Sheet?_			
Notes	·					
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Please return this form to: Bonnie Daniels: lawrdans@bellsouth.net

Fax: 305-255-3540 Phone: 305-255-6455

Group Contacts for Outreach Miami-Dade County <u>Group Contacts</u>

Group Name	Contact information	<u>Date of</u> <u>Contact</u>	Result
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<u>Media Contacts</u>

<u>Media Outlet</u>	Contact information	<u>Date of</u> <u>Contact</u>	Result
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