# ATTENDANCE SHEET

**Date:** 8/29/16 **Committee:** Incarceration Issues

**PLEASE PRINT**

| Name | Organization/City | E-mail Address |
|---|---|---|
| Barb McGillivray | DOCR | |
| Rachelle Juntunen | Warden- DWCRC | |
| Kelli Krieg | Treatment Services - DWCRC | |
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