



Ione Police Department

1 E. Main Street / P.O. Box 398
Ione, CA 95640

OFFICER CONTACT REQUEST

Name: _____ Date/Time: _____

Address: _____ Telephone: _____

This request is for:

- | | |
|---|---|
| <input type="checkbox"/> Chief Alfred | <input type="checkbox"/> Officer Damiano |
| <input type="checkbox"/> Sergeant Sgroi | <input type="checkbox"/> Officer Andriola |
| <input type="checkbox"/> Corporal Rego | <input type="checkbox"/> Officer Reeder |
| <input type="checkbox"/> Corporal Legorreta | <input type="checkbox"/> Mark Harmon |
| <input type="checkbox"/> Officer Casias | <input type="checkbox"/> Other _____ |

This request is regarding:
