I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE CTR - Technician HES DATE TOTAL Adrian Covarrubias E-mail address: E-mail address: PHONE: 713-296-3368	DEDUCED 1. COMPANDED COMPANDED COMPAND AND A COMPAND C	Submit I Copy To Appropriate District Office	ate of New Mexico	Form C-103
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