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| Issue # | | | |  | | **Applies to** | | | Choose an item. |
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| Reason Sent to Cancer Committee | | | | | Choose an item. | | | | |
|  | | | | | | | | | |
| User Name\* |  | | | | | | **Email\*** |  | |
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| Topic\* |  | | | | | | | | |
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| Checklist |  | | | | | | | | |
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| Additional Checklists(s) | |  | | | | | | | |
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| Issue and Discussion | |  | | | | | | | |
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| Requestor Proposed Action | |  | | | | | | | |
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| Further Discussion | |  | | | | | | | |
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| Action Requested | |  | | | | | | | |
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| Target Release Date | |  | | | | | | | |
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| Outcome | |  | | | | | | | |
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| Work Completed | |  | | | | | | | |
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| References | |  | | | | | | | |
| *If you are using Outlook, please save the document and then click submit button to send to CAP.* | | | | | | | | | |
|  | | | | | | | | | |
| *If you are using web based email (e.g., Yahoo),*  *please save this completed form and send it as an attachment to* [*capecc@cap.org*](file:///C:\Documents%20and%20Settings\dseaman\Desktop\capecc@cap.org)*.*    \*required fields | | | | | | | | | |