

## Alliance Contact Information

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Please include contact information for the primary DEC representative for your organization or agency below.

Name	
Organization	
Title	
Phone Number (Direct)	
E-mail Address	

Please include contact information for the secondary DEC representative for your organization or agency below.

Name	
Organization	TEXAS ALLIANCE
Title	FOR DRUG ENDANGERED CHILDREN
Phone Number (Direct)	Rescue, Defend, Shelter, Support.
E-mail Address	