

26. 10/22/24
Date (Fecha)

26
Agenda Item #
(Numero de agenda)

COBG
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN FAVOR

of the RECOMMENDATION(S)

(Solicitud para comentar a favor de las recomendaciones)

PLEASE PRINT LEGIBLY

(Por favor escriba legible)

Information provided on this form is part of the public record.

(La informacion proporcionada en este formulario es parte del registro publico.)

Kridikel
First Name (Nombre)

TruthBeef
Last Name (Apellido)

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

Shalenek Altruistic Inc
Organization or company, if any

(Organizacion o empresa a la que representa, si corresponde)

Check one box below (Marque una casilla):

☒ I would like to speak as an individual. (Me gustaria comentar como individuo)

☐ I do not need to speak if the item is approved on consent.
(No necesito comentar si el articulo es aprobado)

☐ I would like to register my position, but I do not wish to speak.
(Me gustaria registrar mi puesto, pero no deseo comentar)

PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

10.22.24
Date (Fecha)

26
Agenda Item #
(Numero de agenda)

FY25-26
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN OPPOSITION

of the RECOMMENDATION(S)

(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY

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Mark
First Name (Nombre)

Last Name (Apellido)

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

Organization or company, if any

(Organizacion o empresa a la que representa, si corresponde)

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Spoke

10/22
Date (Fecha)

26
Agenda Item #
(Numero de agenda)

CD BCG H0J
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN OPPOSITION

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(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY

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Kathryn Rhodes
First Name (Nombre)

Last Name (Apellido)

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

Organization or company, if any

(Organizacion o empresa a la que representa, si corresponde)

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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

10/22
Date (Fecha)

26
Agenda Item #
(Numero de agenda)

ESG
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN OPPOSITION

of the RECOMMENDATION(S)

(Solicitud para comentar a contra de las recomendaciones)

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Allegedly Audra
First Name (Nombre)

Last Name (Apellido)

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

Organization or company, if any

(Organizacion o empresa a la que representa, si corresponde)

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Spoke
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**Individuals Speaking by
Phone October 22, 2024**

26	NOTICED PUBLIC HEARING: 2025-29 CONSOLIDATED PLAN AND FISCAL YEAR 2025-26 ANNUAL PLAN STRATEGY DEVELOPMENT			
		Paul	The bold	O
		Consuelo	C	O
		Truth		O
		Audra		O
		Gambler	Hermis	O

"S" indicated the speaker is in support

"O" indicated the speaker is in opposition