

7/16/24
Date (Fecha)

CONSENT
ALL 1 THROUGH 12
Agenda Item #
(Numero de agenda)

CONSENT CALENDAR (ALL)
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN OPPOSITION

of the RECOMMENDATION(S)

(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY
(Por favor escribe legible)

Information provided on this form is part of the public record.
(La informacion proporcionada en este formulario es parte del registro publico.)

Michael Brando
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)

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

7-16-24
Date (Fecha)

1-12
Agenda Item #
(Numero de agenda)

Various
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN OPPOSITION

of the RECOMMENDATION(S)

(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY
(Por favor escribe legible)

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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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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

7/16
Date (Fecha)

Consent
1-13
Agenda Item #
(Numero de agenda)

Consent
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN OPPOSITION of the RECOMMENDATION(S)

(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY
(Por favor escribe legible)

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Allegedly
First Name (Nombre)
Austria
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)

Check one box below (Marque una casilla):

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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoken 8

7/16/24
Date (Fecha)

1-13
Agenda Item #
(Numero de agenda)

1-13
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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Herman
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

Spoken

7-16-24
Date (Fecha)

8
Agenda Item #
(Numero de agenda)

Library WIFI
Subject (Titulo de Agenda)

**REQUEST TO SPEAK
IN OPPOSITION**
of the RECOMMENDATION(S)
(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY
(Por favor escribe legible)

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Mike
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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- I do not need to speak if the item is approved on consent.
(No necesito comentar si el articulo es aprobado.)
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(Me gustaria registrar mi puesto, pero no deseo comentar.)

PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

**Individuals Speaking by
Phone July 16, 2024**

| | | | | |
|----|------------------------------------|----------|---|---|
| 08 | AMEND PO#566069 AT&T WIFI SERVICES | | | |
| | | Consuelo | C | O |
| | | Truth | | O |

"S" indicated the speaker is in support

"O" indicated the speaker is in opposition