

Date

10/16/2019

Agenda Item #

7

Subject

GILLESPIE

REQUEST TO SPEAK IN OPPOSITION

of the RECOMMENDATION(S)

PLEASE PRINT LEGIBLY

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

First Name

ROBERT

Last Name

GERMANN

Address

9314 WESTHILL RD.

City

HKSD

State

CA

Zip

92049

Phone Number

619-654-0785

Organization or company, if any

C.A.C.E

LFA

Check one box below:

- ☒ I would like to speak as an individual.
- ☐ I do not need to speak if the item is approved on consent.
- ☐ I would like to register my position, but I do not wish to speak.

- ☐ I request to speak as part of an organized presentation.
Organized presentations consist of three or more individuals, each of whom must provide substantive testimony. Organized presentations are at the discretion of the Chair. Please attach speaker slips for all speakers.

PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke