Oct. 11, 2022
Date (Fecha)

11
Agenda Item #
(Numero de agenda)

Agenda Item 11 - Fetanyl Education
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)

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Tracy
First Name (Nombre)

Schmidt
Last Name (Apellido)

7817 Gaviota Circle
Address (Direccion)

Carlsbad
City (Ciudad)

CA
State (Estado)

92009
Zip (Codigo Postal)

619-204-5615
Phone Number (Numero de Telefono)

San Diego County office of Education
Organization or company, if any
(Organizacion o empresa a la que representa, si corresponde)

Check one box below *(Marque una casilla)*:

- [x] 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)*

Spoke

PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

11 Oct 22
Date (Fecha)

11
Agenda Item #
(Numero de agenda)

Fentanyl
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN FAVOR

of the RECOMMENDATION(S)

(Solicitud para comentar a favor de las recomendaciones)

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Judy ~~Scheuer~~
First Name (Nombre)

Scheuer
Last Name (Apellido)

8643 Cuesta del Sol
Address (Direccion)

Lakeside
City (Ciudad)

CA
State (Estado)

92040
Zip (Codigo Postal)

619 368 4624
Phone Number (Numero de Telefono)

Hope for the Homeless Lakeside
Organization or company, if any
(Organizacion o empresa a la que representa, si corresponde)

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Spoke

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10/11/22

Date (Fecha)

11

Agenda Item # (Numero de agenda)

Fentanyl Education

Subject (Titulo de Agenda)

REQUEST TO SPEAK IN FAVOR

of the RECOMMENDATION(S)

(Solicitud para comentar a favor de las recomendaciones)

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Oliver

First Name (Nombre)

Twist

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

10/11/22

Date (Fecha)

11

Agenda Item # (Numero de agenda)

Drug Education in Schools

Subject (Titulo de Agenda)

REQUEST TO SPEAK IN FAVOR

of the RECOMMENDATION(S)

(Solicitud para comentar a favor de las recomendaciones)

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Jim

First Name (Nombre)

Crittenden

Last Name (Apellido)

11032 Paseo Castanada

Address (Direccion)

La mesa

City (Ciudad)

CA

State (Estado)

91941

Zip (Codigo Postal)

619 884-9072

Phone Number (Numero de Telefono)

San Diego County Office of Ed.

Organization or company, if any
(Organizacion o empresa a la que representa, si corresponde)

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Oct 11, 22

Date *(Fecha)*

11

Agenda Item #
(Numero de agenda)

Fentanyl

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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Mark

First Name *(Nombre)*

Last Name *(Apellido)*

Address *(Direccion)*

City *(Ciudad)*

State *(Estado)*

Zip *(Codigo Postal)* 92109

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)*:

- [x] I would like to speak as an individual. *(Me gustaria comentar como individuo.)*
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(Rev. 10/16)

Spoke

10/11/2022

Date *(Fecha)*

11

Agenda Item #
(Numero de agenda)

Fentanyl

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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Mike

First Name *(Nombre)*

Bonella

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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Date *(Fecha)*

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Fentanyl
Subject *(Titulo de Agenda)*

REQUEST TO SPEAK IN OPPOSITION

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Aldra
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.)

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(Rev. 10/16)

spoke

Individuals Speaking by Phone
October 11, 2022

11	ENHANCING FENTANYL EDUCATION			
		Barbra	Gordon	S
		Diane	Grace	S
		Patrick	Holstrom	S
		Kelly	McCormick	S
		Katie	Poponyak	S
		Becky	Rapp	S
		Ann	Riddle	S
		KC	Strang	S
		Peggy	Walker	S
		Truth		O

"S" indicated the speaker is in support
"O" indicated the speaker is in opposition