09/27/2022
Date (Fecha)

8
Agenda Item # (Numero de agenda)

Child Care Workforce Investment Program
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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Eileen
First Name (Nombre)

Calderon
Last Name (Apellido)

180 Otay Lakes Rd #300
Address (Direccion)

Bonita
City (Ciudad)

CA
State (Estado)

92102
Zip (Codigo Postal)

(760) 455-7369
Phone Number (Numero de Telefono)

Child Development Associates.
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

9-27-2022
Date (Fecha)

8
Agenda Item # (Numero de agenda)

Child Care Workforce Investment Program
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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Lucia
First Name (Nombre)

Garay
Last Name (Apellido)

63 Whitney Str.
Address (Direccion)

Chula Vista
City (Ciudad)

CA
State (Estado)

9191
Zip (Codigo Postal)

(619) 250-0065
Phone Number (Numero de Telefono)

N/A
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)*

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Spoke

09/27/2022
Date *(Fecha)*

8
Agenda Item #
(Numero de agenda)

Child Care Workforce Investment Program
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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Courtney
First Name *(Nombre)*

Baltiysky
Last Name *(Apellido)*

2929 Meade Ave
Address *(Direccion)*

San Diego
City *(Ciudad)*

CA
State *(Estado)*

92116
Zip *(Codigo Postal)*

619-385-0460
Phone Number *(Numero de Telefono)*

YMCA CRS
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

(Rev. 10/16)

8

9/27/2022
Date *(Fecha)*

1-19 & IA01 Consent Calendar
Agenda Item #
(Numero de agenda)

13, 17, 12, 2, 3, 5, 6, 7, 8, 9, 18
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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PAUL
First Name *(Nombre)*

HENKIN
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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(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

(Rev. 10/16)

Spoke

9/27/2022

Date *(Fecha)*

F-19 + JA01 & CONSENT CALENDAR

Agenda Item #
(Numero de agenda)

8

CONSENT CALENDAR

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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Michael — First Name *(Nombre)*

Brando — 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

Spoke

(Rev. 10/16)

9/27

Date *(Fecha)*

IHHS + 1-19

Agenda Item #
(Numero de agenda)

8

Consent

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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Andra

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)*:**

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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.)
- [ ] 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

9/27/2022
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1-19 & JA01
Consent Calendar
Agenda Item #
(Numero de agenda)

Subject *(Título de Agenda)*

REQUEST TO SPEAK IN FAVOR

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CONSUELO
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)*:

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☐ I do not need to speak if the item is approved on consent.
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(Me gustaria registrar mi puesto, pero no deseo comentar)

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(Rev. 10/16)

Individuals Speaking by Phone
September 27, 2022

08	CHILD CARE WORKFORCE INVESTMENT PROGRAM			
		Erin	Hogeboom	S
		Truth		O
		Martin	Huici	S
		Armando	Sepulveda II	S

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