1/28/25
Date (Fecha)

#1
Agenda Item # (Numero de agenda)

Housing programs
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.)

Rachael
First Name (Nombre)

Hayes
Last Name (Apellido)

Address (Direccion)

City (Ciudad) State Zip (Codigo Postal)

[redacted]
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.03/23)

1-28-25
Date (Fecha)

1
Agenda Item # (Numero de agenda)

Housing
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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Julie
First Name (Nombre)

Porter
Last Name (Apellido)

Address (Direccion)

[redacted]

City (Ciudad) State (Estado) Zip (Codigo Postal)

[redacted]
Phone Number (Numero de Telefono)

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

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Spoke

(Rev.03/23)

JAN 25

Date *(Fecha)*

CONSENT

Agenda Item # *(Numero de agenda)*

ALL CONSENT 1,2,3,4,5,6,7,8,9,10

Subject *(Titulo de Agenda)*

REQUEST TO SPEAK 11,12,13
IN OPPOSITION
of the RECOMMENDATION(S)
(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY
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ADAN C

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

(Rev. 03/23)

1-28-25 | Consent

Date *(Fecha)* | Agenda Item # *(Numero de agenda)*

several

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)*

Phone Number *(Numero de Telefono)*

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

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Spoke

(Rev. 03/23)

1/28 | Consent

Date *(Fecha)* | 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)

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Allegedly 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)

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Spoke

(Rev. 03/23)

Individuals Speaking by Phone January 28, 2025

01	AUTHORIZE ACCEPTANCE OF FUNDING FOR THE TRANSITIONAL HOUSING PROGRAM			
		Paul	The bold	O
		Ann	Riddle	S
		Justin	Castro	O
		Consuelo	C	O
		Madison	Rapp	S
		John	Brady	S

"S" indicated the speaker is in support

"0" indicated the speaker is in opposition