

1

NON-AGENDA PUBLIC COMMUNICATION REQUEST TO SPEAK

(Comunicacion publica no agendada- Solicitud para comentar)

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.)

8/16/22

Date (Fecha)

Subject (Titulo de Agenda)

Non agenda - Accountability

First Name (Nombre)

Oliver

Last Name (Apellido)

Twist

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

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

PLEASE SEE REVERSE FOR SPEAKING GUIDE

Long

2

NON-AGENDA PUBLIC COMMUNICATION REQUEST TO SPEAK

(Comunicacion publica no agendada- Solicitud para comentar)

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.)

8/16/22

Date (Fecha)

Palomar Health Closure of GPM

Subject (Titulo de Agenda)

First Name (Nombre)

Cynthia

Last Name (Apellido)

Chesny

Address (Direccion)

4170 Hurley Dr.

City (Ciudad)

LA Mesa

State
(Estado)

CA

Zip (Codigo Postal)

91941

Phone Number (Numero de Telefono)

619 274 6139

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

California Nurses Association

PLEASE SEE REVERSE FOR SPEAKING GUIDE

poke

3

NON-AGENDA PUBLIC COMMUNICATION REQUEST TO SPEAK

(Comunicacion publica no agendada- Solicitud para comentar)

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.)

8/14/2022
Date (Fecha)

Palomar Health Closure of Geriatric
Subject (Titulo de Agenda) Psych Unit (GRU)

Piñeres
First Name (Nombre)

Faustino
Last Name (Apellido)

1866 Shady Oak Road
Address (Direccion)

San Diego
City (Ciudad)

CA
State (Estado)

92114
Zip (Codigo Postal)

(702) 509-0172
Phone Number (Numero de Telefono)

California Nurses Association (CNA)
Organization or company you are representing, if any
(Organizacion o empresa a la que representa, si corresponde)

Look

4

NON-AGENDA PUBLIC COMMUNICATION REQUEST TO SPEAK

(Comunicacion publica no agendada- Solicitud para comentar)

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.)

8/16/2022
Date (Fecha)

Water
Subject (Titulo de Agenda)

Mike
First Name (Nombre)

Bonello
Last Name (Apellido)

2704 Tiburon Ave
Address (Direccion)

Carlsbad
City (Ciudad)

CA
State (Estado)

92010
Zip (Codigo Postal)

619-889-5452
Phone Number (Numero de Telefono)

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

Look

5

NON-AGENDA PUBLIC COMMUNICATION REQUEST TO SPEAK

(Comunicacion publica no agendada— Solicitud para comentar)

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.)

8/16
Date (Fecha)

buttes
Subject (Titulo de Agenda)

Andra
First Name (Nombre) Last Name (Apellido)

Address (Direccion)

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

Phone Number (Numero de Telefono)

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

speaker

6

NON-AGENDA PUBLIC COMMUNICATION REQUEST TO SPEAK

(Comunicacion publica no agendada— Solicitud para comentar)

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.)

Aug 16, 22
Date (Fecha)

For
Subject (Titulo de Agenda)

Mark
First Name (Nombre) Last Name (Apellido)

Address (Direccion)

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

Phone Number (Numero de Telefono)

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

speaker

⑦

NON-AGENDA PUBLIC COMMUNICATION REQUEST TO SPEAK

(Comunicacion publica no agendada- Solicitud para comentar)

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.)

8/16/22
Date (Fecha)

Non Agenda
Subject (Titulo de Agenda)

Consuelo
First Name (Nombre)

Last Name (Apellido)

Address (Direccion)

Bonita
City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

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

PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

**Individuals Speaking by Phone
August 16, 2022**

	Non-Agenda Public Comment			
		Diane	Grace	S
		Paul	Henkin	S
		Kathleen	Lippitt	O
		Becky	Rapp	S
		Kevin	Stevenson	S
		Truth		O

“S” indicated the speaker is in support

“O” indicated the speaker is in opposition