

NOV. 15 2022

Date (Fecha)

19

Agenda Item #

BONITA MUSEUM & CULTURAL CENTER

(Numero de agenda)

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.)

WENDY

WILSON

First Name (Nombre)

Last Name (Apellido)

1904 Cypress Ave

Address (Direccion)

SD

CA

State (Estado)

02104

Zip (Codigo Postal)

760 822 2524

Phone Number (Numero de Telefono)

Bonita Museum + Cultural Ctr.

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

NOV. 15, 2022

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BONITA MUSEUM & CULTURAL CENTER

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Subject (Titulo de Agenda)

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(Solicitud para comentar a favor de las recomendaciones)

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Barbara

Scott

First Name (Nombre)

Last Name (Apellido)

4546 Cresta Verde Ln

Address (Direccion)

Bonita

91502

CA

State (Estado)

91902

Zip (Codigo Postal)

619 / 895-6511

Phone Number (Numero de Telefono)

BONITA MUSEUM & CULTURAL CTR

Organization or company, if any

(Organizacion o empresa a la que representa, si corresponde)

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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Nov 15, 22

Date (Fecha)

1-25

Agenda Item #
(Numero de agenda)

many

Subject (Titulo de Agenda)

19

REQUEST TO SPEAK IN OPPOSITION

of the RECOMMENDATION(S)
(Solicitud para comentar a contra de las recomendaciones)

PLEASE PRINT LEGIBLY
(Por favor escribe legible)

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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):

- I would like to speak as an individual. (Me gustaria comentar como individuo.)
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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

11/15
Date (Fecha)

1-05
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)

PLEASE PRINT LEGIBLY
(Por favor escribe legible)

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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.)
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Spoke

19

Individuals Speaking by Phone

November 15, 2022

	BONITA HISTORICAL SOCIETY FOR THE BONITA MUSEUM AND CULTURAL CENTER		
19		Truth	0

"S" indicated the speaker is in support

"0" indicated the speaker is in opposition