

12/10/24

41

Date (Fecha)

Agenda Item #
(Numero de agenda)

Fema Shelter

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)

Information provided on this form is part of the public record.
(La informacion proporcionada en este formulario es parte del registro publico.)

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.)

PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

12/10

41

Date (Fecha)

Agenda Item #
(Numero de agenda)

Fema

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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Spoke

12-10-24

Date (Fecha)

#41

Agenda Item #
(Numero de agenda)

FEMA Support Funding

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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BRYANT

First Name (Nombre)

Rumbaugh

Last Name (Apellido)

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

Organization or company, if any

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Spoke

12-10-2024

Date (Fecha)

41

Agenda Item #
(Numero de agenda)

FEMA for IMMIGRANTS

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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Pam

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MAKOAmerica GREAT AGAIN

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

12/10
Date (Fecha)

Agenda 41
Agenda Item #
(Numero de agenda)

Tema
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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Kim
First Name (Nombre)

Yeater
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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12/10/2024
Date (Fecha)

41
Agenda Item #
(Numero de agenda)

PENIA
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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AMY
First Name (Nombre)

ROITCHER
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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12/10/24

41

Date (Fecha)

Agenda Item #
(Numero de agenda)

Migrant support, expand 2 million
Subject (Titulo de Agenda)

REQUEST TO SPEAK IN FAVOR

of the RECOMMENDATION(S)

(Solicitud para comentar a favor de las recomendaciones)

PLEASE PRINT LEGIBLY
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Teresa

Perez

First Name (Nombre)

Last Name (Apellido)

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Chula Vista

Phone Number (Numero de Telefono)

San Diego Organizing Project

Organization or company, if any

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

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12/10/24

41

Date (Fecha)

Agenda Item #
(Numero de agenda)

Migrant Support services and ability founder take
steps to expend funds related to FEMA
Subject (Titulo de Agenda) Shelter and services program

REQUEST TO SPEAK IN FAVOR

of the RECOMMENDATION(S)

(Solicitud para comentar a favor de las recomendaciones)

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Ashley

Mendoza

First Name (Nombre)

Last Name (Apellido)

Address (Direccion)

City (Ciudad)

State
(Estado)

Zip (Codigo Postal)

Phone Number (Numero de Telefono)

San Diego organizing Project

Organization or company, if any

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

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(Numero de agenda)

41

Subject (Titulo de Agenda)

SSP Funding

REQUEST TO SPEAK IN FAVOR

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

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Flower
First Name (Nombre)

Alvarez Lopez
Last Name (Apellido)

Address (Direccion)

[Redacted Address]

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

[Redacted City and State]

Phone Number (Numero de Telefono)

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

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Date (Fecha)

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Agenda Item #
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41

Subject (Titulo de Agenda)

Immigrants

REQUEST TO SPEAK IN FAVOR

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Mary
First Name (Nombre)

Nier
Last Name (Apellido)

Address (Direccion)

[Redacted Address]

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

[Redacted City and State]

Phone Number (Numero de Telefono)

Organization or company, if any
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**Individuals Speaking by Phone
December 10, 2024**

41	AUTHORIZE AGREEMENT FOR MIGRANT SUPPORT SERVICES			
		Paul	TheBold	O
		Gambler	Hermis	S
		Stefanie	Becker	O

**“S” indicated the speaker is in support
“O” indicated the speaker is in opposition**