

Date (Fecha) 9/26/2007 Agenda Item # 26
Subject (Titulo de Agenda) Teleconference

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) Sandra Last Name (Apellido) Martinez

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*

Date (Fecha) 9/26/2007 Agenda Item # 20 (?)
Subject (Titulo de Agenda) Teleconferencing

REQUEST TO SPEAK IN OPPOSITION of the RECOMMENDATION(S)

(Solicitud para comentar a contra de las recomendaciones)

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First Name (Nombre) Mary Last Name (Apellido) D

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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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE *Spoke*

4/26/22
Date (Fecha)

2326
Agenda Item #
(Numero de agenda)
2326

TRAUMA ETC TELECOM SERVICES
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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J. Asor
First Name (Nombre)

Raso
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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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

4/26
Date (Fecha)

1-28-C
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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26

Audra
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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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

4/22/22

1-28-C

Date (Fecha)

Agenda Item #
(Numero de agenda)

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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26

Ansueh

First Name (Nombre)

Last Name (Apellido)

Address (Direccion)

Bonita

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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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE

Spoke

**Individuals Speaking by Phone
April 26, 2022**

TELECONFERENCED MEETINGS			
26		Kevin	Stevenson
			S

“S” indicated the speaker is in support

“O” indicated the speaker is in opposition