

REQUEST TO SPEAK FORM

This document is a public record, subject to disclosure under the California Public Records Act.
This document may also be added to the meeting materials posted on the County website.

If you wish to address the Board, Committee, or Commission, please fill out this form and place it in the container provided.

DATE: 2-6-24

AGENDA ITEM NO. 23

For Issue ☐

Against Issue ☐

Neutral ☐

* Written comments for the record only ☐

NAME (OPTIONAL): STEVE BARON Decline to State ☐

PLEASE PRINT CLEARLY

ORGANIZATION (OPTIONAL): CAPC

PLEASE PRINT CLEARLY

ADDRESS (OPTIONAL): _____

PLEASE PRINT

*If you want to provide written comments for the record only, and you do NOT wish to address the Board, Committee, or Commission orally, please write comments below:

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DATE: 2/6/24

AGENDA ITEM NO. 23

For Issue ☐

Against Issue ☐

Neutral ☒

* Written comments for the record only ☐

NAME (OPTIONAL): Katie Joh Decline to State ☐

PLEASE PRINT CLEARLY

ORGANIZATION (OPTIONAL): Dependency Advocacy Center

PLEASE PRINT CLEARLY

ADDRESS (OPTIONAL): _____

PLEASE PRINT

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