

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. 6

For Issue ☐

Against Issue ☐

Neutral ☐

* Written comments for the record only ☐

NAME (OPTIONAL): Zach Taylor Decline to State ☐

PLEASE PRINT CLEARLY

ORGANIZATION (OPTIONAL): KNPA - Santa Clara County Nurse

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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For Issue ☐

Against Issue ☐

Neutral ☐

* Written comments for the record only ☐

NAME (OPTIONAL): SUSIE YORK Decline to State ☐

PLEASE PRINT CLEARLY

ORGANIZATION (OPTIONAL): RNPA

PLEASE PRINT CLEARLY

ADDRESS (OPTIONAL): _____

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Against Issue ☐

Neutral ☐

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NAME (OPTIONAL): Matthew Gee Decline to State ☐

PLEASE PRINT CLEARLY

ORGANIZATION (OPTIONAL): Clean Harbors Environmental Services

PLEASE PRINT CLEARLY

ADDRESS (OPTIONAL): _____

PLEASE PRINT

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