



Coalition of
Communities of
Color

***Multnomah County Budget Hearing
May 29, 2013
5:30pm-8:00pm
Immigrant and Refugee Community Organization,
Portland, OR***

- 5:30pm *Arrival:* refreshments served
- 5:45pm *Entertainment:*
Dina y Los Rumberos Del Caribe
- 6:00pm-6:20pm *Introduction by:*

The Coalition of Communities of Color's
Executive Committee
- Opening remarks by*
Commissioner Chair Jeff Cogen
- 6:20pm-7:50pm Community public testimony
- 8:00pm *Closing remarks:*
Chair Jeff Cogen
Lee Po Cha, Associate Director of IRCO

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

Please complete this form and return to the Board Clerk
This form is a public record

MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SSE

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Reynaldo Ramirez

ADDRESS: 5335 NE ally Blvd # 305

CITY/STATE/ZIP: Portland / OR / 97218

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

1. Please complete this form and submit to the Board Clerk.
2. Submittal of this form at the beginning of the meeting is appreciated.
3. Individuals making public comment will be called up in the order these forms are received. The Chair may call on Invited Guests or Elected Officials to speak first.
4. When your name is called, come forward & be seated at the Presenter's table.
5. When it is your turn, start by stating your name for the record. Make sure to speak clearly into the microphones. All meetings are recorded.
6. Public comment is limited to **3 minutes** per person, but the Chair has the authority to shorten time, based on the number of folks testifying.
7. If you wish to present written documentation with your oral comments, please bring 7 copies and submit to the Board Clerk, who will distribute them to the Commissioners. Your testimony will be kept permanently.

IF YOU WISH TO SUBMIT WRITTEN INSTEAD OF ORAL COMMENTS TO THE BOARD:

1. Please complete this form along with your written testimony and return to the Board Clerk at the meeting, or submit by e-mail at: lynda.grow@multco.us
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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Marin Rodriguez

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Maria fernanda Diaz

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Misipa Fononga

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): STRA

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Joaquin Pasta \$170K/yr FUNDING

ADDRESS: 138 NE 138th 3rd

CITY/STATE/ZIP: Gresham, OR

PHONE: DAYS: 503.489.6836 EVES: _____

EMAIL: _____ FAX: _____

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MEETING DATE: 5-29-13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Antipoverty Services - Seniors (Aging and disabilities)

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Patricia Rojas

ADDRESS: 16111 NE 49th Ave

CITY/STATE/ZIP: Portland, OR 97218

PHONE: DAYS: 503-750-5427 EVES: _____

EMAIL: projas@catholiccharitiesoregon.org FAX: _____

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget ✓

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

MULTNOMAH COUNTY ANIMAL SERVICES

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: JON GRAMSTAD

ADDRESS: 1306 NE 153rd

CITY/STATE/ZIP: PORTLAND, OR

PHONE: _____ DAYS: 503, 421, 2270 EVES: _____

EMAIL: j.gramstad@comcast.net FAX: _____

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): DCHS 25048A
DVERT

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: KRIS BILLHARDT

ADDRESS: 4817 NE 35th AVE.

CITY/STATE/ZIP: PORTLAND OR 97211

PHONE: DAYS: 503 802 0492 EVES: 503 284 4180

EMAIL: kbillhardt@vona1.org FAX: 503 771-5347

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MEETING DATE: 5/29/2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Anti-Poverty

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: AMRAN Goni

ADDRESS: 2333 SE 130th Ave Apt C101

CITY/STATE/ZIP: Portland, OR 97233

PHONE: _____ DAYS: 503-839-8272 EVES: -

EMAIL: _____ FAX: _____

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SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SET, SUN

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Lyella Sanders

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Gerald Deloney

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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MEETING DATE: 5/29/2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Anti-Poverty

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Bonja Gill

ADDRESS: 3540 SE 157th Ave Apt # A

CITY/STATE/ZIP: Portland Oregon 97236

PHONE: DAYS: 503-410-4552 EVES: 503-830-7102

EMAIL: GillTonga.Yahoo.com FAX: —

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1

**JUNTA DE COMISIONADOS DEL CONDADO DE MULTNOMAH
REGISTRO PARA TESTIMONIO PÚBLICO**

**Por favor, complete este formulario y someta lo a la Secretaria de Junta
*** Este formulario es un documento público *****

FECHA DE REUNION: _____

ASUNTO: Presupuesto del Año Fiscal 2014 del Condado de Multnomah

TEMA PRESUPUESTARIA (Departamento o Programa):

Hacienda CDC (SSSES)

EN FAVOR: _____ EN CONTRA: _____ DEL TEMA PRESUPUESTARIO

NOMBRE: Alma Rivera Alma Rivera

DIRECCIÓN: 5136 NE 42nd Ave Portland OR

CIUDAD / ESTADO / CODIGO POSTAL: Portland OR 97218

TELÉFONO: DÍAS: 503-469-3704 VISPERAS: _____

CORREO ELECTRONICO: arivera@haciendacdc.org FAX: _____

SI USTED DESEA PRESENTAR A LA JUNTA DE COMISIONADOS EN PERSONA:

1. Por favor, complete este formulario y someta lo a la Secretaria de Junta.
2. Se le aprecia que someta este formulario en el comienzo de la reunión.
3. Las personas que hacen comentarios públicos serán llamados en el orden en que se reciben estos formularios. El Presidente (Chair) podrá pedir que invitados o funcionarios electos presenten primero.
4. Cuando su nombre se llama, tome asiento en la mesa de Presentadores.
5. Cuando sea su turno, empieza su presentación diciendo su nombre para el registro. Asegúrese de hablar con claridad en los micrófonos. Todas las reuniones son grabadas.
6. Los comentarios del público se limitan a 3 minutos por persona, pero el Presidente (Chair) tiene la autoridad para acortar el tiempo, basado en el número de personas que testifican.
7. Si usted desea presentar documentación por escrito con sus comentarios orales, por favor traiga 7 copias y presente las al Secretario de la Junta, que las distribuirá a los miembros de la Comisión. Su testimonio se mantendrá permanente.

SI DESEA SOMETER COMENTARIOS ESCRITOS EN LUGAR DE COMENTARIOS ORALES A LA JUNTA DE COMISIONADOS:

1. Por favor, complete este formulario junto con su testimonio escrito y somete la, en la reunión con la Secretaría de Junta, o mande los através de e-mail a: lynda.grow@multco.us
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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
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MEETING DATE: 05/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SSSES

Social Support Services for educational Success

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Alejandra Galindo

ADDRESS: 5130 NE 42nd Ave

CITY/STATE/ZIP: Portland, OR

PHONE: DAYS: 503-459-3648 EVES:

EMAIL: agalindo@haciendaadc.org FAX:

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FECHA DE REUNION: _____

ASUNTO: Presupuesto del Año Fiscal 2014 del Condado de Multnomah

TEMA PRESUPUESTARIA (Departamento o Programa):

EN FAVOR: X EN CONTRA: _____ DEL TEMA PRESUPUESTARIO

NOMBRE: Guadalupe Avila

DIRECCIÓN: 5136 NE42nd

CIUDAD / ESTADO / CODIGO POSTAL: Portland OR

TELÉFONO: DÍAS: 503-595-2111 VISPERAS: _____

CORREO ELECTRONICO: gavila@hacienda.cdc.org FAX: _____

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ASUNTO: Presupuesto del Año Fiscal 2014 del Condado de Multnomah

TEMA PRESUPUSTARIA (Departamento o Programa):

EN FAVOR: _____ EN CONTRA: _____ DEL TEMA PRESUPUESTARIO

NOMBRE: Rosario Sanchez

DIRECCIÓN: 4323 Ne Prescott st.

CIUDAD / ESTADO / CODIGO POSTAL: Portland OR 97218

TELÉFONO: DÍAS: 503-960-3278 VISPERAS: _____

CORREO ELECTRONICO: _____ FAX: _____

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3. Las personas que hacen comentarios públicos serán llamados en el orden en que se reciben estos formularios. El Presidente (Chair) podrá pedir que invitados o funcionarios electos presenten primero.
4. Cuando su nombre se llama, tome asiento en la mesa de Presentadores.
5. Cuando sea su turno, empieza su presentación diciendo su nombre para el registro. Asegúrese de hablar con claridad en los micrófonos. Todas las reuniones son grabadas.
6. Los comentarios del público se limitan a 3 minutos por persona, pero el Presidente (Chair) tiene la autoridad para acortar el tiempo, basado en el número de personas que testifican.
7. Si usted desea presentar documentación por escrito con sus comentarios orales, por favor traiga 7 copias y presente las al Secretario de la Junta, que las distribuirá a los miembros de la Comisión. Su testimonio se mantendrá permanente.

SI DESEA SOMETER COMENTARIOS ESCRITOS EN LUGAR DE COMENTARIOS ORALES A LA JUNTA DE COMISIONADOS:

1. Por favor, complete este formulario junto con su testimonio escrito y somete la, en la reunión con la Secretaría de Junta, o mande los através de e-mail a: lynda.grow@multco.us
2. El testimonio escrito será inscrito en el registro oficial.

**JUNTA DE COMISIONADOS DEL CONDADO DE MULTNOMAH
REGISTRO PARA TESTIMONIO PÚBLICO**

**Por favor, complete este formulario y someta lo a la Secretaria de Junta
*** Este formulario es un documento público *****

FECHA DE REUNION: 05/29/13

ASUNTO: Presupuesto del Año Fiscal 2014 del Condado de Multnomah

TEMA PRESUPUESTARIA (Departamento o Programa):

SSSES, Social Support Services for Educational Success

EN FAVOR: W EN CONTRA: _____ DEL TEMA PRESUPUESTARIO

NOMBRE: Jacqueline Alvarez

DIRECCIÓN: 8913 W Fortune

CIUDAD / ESTADO / CODIGO POSTAL: Portland, OR 97203

TELÉFONO: DÍAS: 503-740-8665 VISPERAS: _____

CORREO ELECTRONICO: _____ FAX: _____

SI USTED DESEA PRESENTAR A LA JUNTA DE COMISIONADOS EN PERSONA:

1. Por favor, complete este formulario y someta lo a la Secretaria de Junta.
2. Se le aprecia que someta este formulario en el comienzo de la reunión.
3. Las personas que hacen comentarios públicos serán llamados en el orden en que se reciben estos formularios. El Presidente (Chair) podrá pedir que invitados o funcionarios electos presenten primero.
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2

MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

Please complete this form and return to the Board Clerk
This form is a public record



MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Ms. [unclear] Bill Gentile

ADDRESS: 712 SW St. Clair Ave., Apt 104

CITY/STATE/ZIP: Portland, OR 97205

PHONE: DAYS: 503.274.7620 EVES: _____

EMAIL: bill.gentile@gmail.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

1. Please complete this form and submit to the Board Clerk.
2. Submittal of this form at the beginning of the meeting is appreciated.
3. Individuals making public comment will be called up in the order these forms are received. The Chair may call on Invited Guests or Elected Officials to speak first.
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IF YOU WISH TO SUBMIT WRITTEN INSTEAD OF ORAL COMMENTS TO THE BOARD:

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2. Written testimony will be entered into the official record.

Multnomah Youth Commission

- ✓ Amy Qui "Q"
- ✓ Kassamira Carter-Howard
- ✓ Fatuma Gedi
- ✓ Jose Lopez-Delgado

MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

Please complete this form and return to the Board Clerk
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MEETING DATE: 5/29/2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): MYC

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Amy Gruz

ADDRESS: 3406 SW 12th Ave

CITY/STATE/ZIP: Portland, OR 97239

PHONE: DAYS: 503-317-1429 EVES: _____

EMAIL: amygruz@gmail.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Multnomah Youth Commission

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Jose Lopez Delgado

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: lopez.delgado.jose@gmail.com FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): MY C

FOR: MYC AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Fatuma Cedi

ADDRESS: 12622 SE Ramona St #16

CITY/STATE/ZIP: Portland, OR, 97236

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: fatumagedi@gmail.com FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

Please complete this form and return to the Board Clerk
This form is a public record

MEETING DATE: May 29 2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Multnomah Youth
Commission

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: KASSAMIA CARTER

ADDRESS: 3725 NE Killingsworth

CITY/STATE/ZIP: Portland OR 97211

PHONE: DAYS: 971 207 0830 EVES: _____

EMAIL: _____ FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Allocation of General Fund Dollars

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: John Trinh / Mona Knapp (Lake-Dorf)

ADDRESS: 8915 SW Center

CITY/STATE/ZIP: TIGARD OR 97223

PHONE: DAYS: 503-726-3704 EVES: _____

EMAIL: mknapp@lake-dorf.org FAX: 503-726-3705

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

Please complete this form and return to the Board Clerk
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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Housing for domestic violence survivors / support services

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Sarah Ronick

ADDRESS: Catholic Charities Proyecto UNICA

CITY/STATE/ZIP: Portland OR 97202

PHONE: _____ DAYS: 503 688 2632 EVES: _____

EMAIL: SRONICK@catholiccharitiesoregon.org FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Field improvements

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Jacque Sage

ADDRESS: 3604 NE 90

CITY/STATE/ZIP: Portland OR 97213

PHONE: DAYS: 503 975-7369 EVES: 503-281-6502

EMAIL: J.Sage@PPS.net FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

Please complete this form and return to the Board Clerk
This form is a public record

MEETING DATE: 5/29/12

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: RICKY ALLEN

ADDRESS: 5210 N. KERBY

CITY/STATE/ZIP: PORTLAND

PHONE: DAYS: 503-916-5180-71307 ^{EXT} EVES: _____

EMAIL: rallen2@pps.net FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SEJ

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Ronnie Lucero

ADDRESS: 9314 SE Sherrianne Ct

CITY/STATE/ZIP: Portland, OR 97222

PHONE: DAYS: 503-997-6661 EVES: Same

EMAIL: DiamondCutLoyalty@gmail.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 3/29/2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SUN

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Monique Serret

ADDRESS: 3920 N Kerby

CITY/STATE/ZIP: 97217

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: Monques@Selfenhancement.org FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SET

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Lakesha Wells

ADDRESS: 4825 NE Cleveland Ave Apt 7

CITY/STATE/ZIP: Portland OR 97211

PHONE: DAYS: 971-208-5906 EVES: _____

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Madison High School Turf Project

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Joey Razzano

ADDRESS: 2030 NE 101st Ave

CITY/STATE/ZIP: PH 97213

PHONE: DAYS: 503-998-5096 EVES: _____

EMAIL: joey.razzano@comcast.net FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Funding for Madison SUN turf field project

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Jane Rosenstein

ADDRESS: 3152 NE 73rd Avenue

CITY/STATE/ZIP: Portland, OR 97213

PHONE: DAYS: (503) 970-1453 EVES: Same

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Lincoln Park Sun School

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Don Grotting & Becky Chase

ADDRESS: 12123 SE Lexington

CITY/STATE/ZIP: Portland

PHONE: _____ DAYS: _____ EVES: 503-308-0170

EMAIL: SUPER IN NOT SET FAX: _____

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IF YOU WISH TO SUBMIT WRITTEN INSTEAD OF ORAL COMMENTS TO THE BOARD:

1. Please complete this form along with your written testimony and return to the Board Clerk at the meeting, or submit by e-mail at: lynda.grow@multco.us
2. Written testimony will be entered into the official record.

MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

Please complete this form and return to the Board Clerk
This form is a public record

MEETING DATE: 5/28/13 ✓

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Youth Programs /
Domestic Violence and Sexual Assault

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Natalie Arreola

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: 503.688.2678 EVES: _____

EMAIL: Narreola@catholicchantresoregon.org FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5.29.31

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Zenger Farm Urban Grange

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Jill Kuebler

ADDRESS: 11741 SE Foster Rd

CITY/STATE/ZIP: Portland OR 97266

PHONE: DAYS: 503 282 4245 EVES: _____

EMAIL: jill@zengerfarm.org FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): ~~SSSE~~ ~~SSSE~~ SSSES

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Kenia Gonzalez

ADDRESS: _____

CITY/STATE/ZIP: Gresham OR 97030

PHONE: _____ DAYS: 503-724-5308 EVES: _____

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/21/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Homeless Youth Continuum
Alcohol & Drug / Mental Health Services

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Jennifer Wallis

ADDRESS: New Avenues for Youth

CITY/STATE/ZIP: 314 SW 9th Ave

PHONE: DAYS: 503-317-1190 EVES: _____

EMAIL: jwallis@newavenues.org FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Healthy Start -
Healthy Families

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Mara Zusman

ADDRESS: 6836 SE Mitchell St

CITY/STATE/ZIP: Portland OR 97206

PHONE: DAYS: 503-432-3495 EVES: 503-774-1897

EMAIL: MaraZusman@gmail.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM):
Healthy Start

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Lindsay L. Liddell

ADDRESS: 100 W. COOK ST

CITY/STATE/ZIP: Portland Or. 97227

PHONE: DAYS: 503-575-9427 EVES: 971-277-0621

EMAIL: Lindsay10077@Gmail.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Healthy Start

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Jodi Greer

ADDRESS: 1351 NE Greenway DR

CITY/STATE/ZIP: Gresham, OR 97030

PHONE: DAYS: 503-332-8018 EVES: _____

EMAIL: Jodi.Greer@llr.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget ✓

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Healthy Start
Healthy Families Impact N. W.

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Savannah P. Bishop

ADDRESS: 2068 SE Madison St

CITY/STATE/ZIP: Portland / Oregon , 97214

PHONE: DAYS: (562) 852-1672 EVES: N/A

EMAIL: SavvyFairyt@gmail.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

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This form is a public record

MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Healthy
State - Healthy Families

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Bridget Mendoza-Moore "BRIDZY"

ADDRESS: 7211 SE 62nd Ave

CITY/STATE/ZIP: Portland, OR 97211

PHONE: DAYS: (503) 888-5961 x 236 EVES: _____

EMAIL: bmendoza.moore@impactnw.org FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Homeless Youth System and MH & Addictions Treatment Support
for homeless youth

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Nel Taylor (outsidem)

ADDRESS: 1132 SW 13th ave

CITY/STATE/ZIP: Portland OR 97205

PHONE: DAYS: 503-719-1448 EVES: _____

EMAIL: NelT@outsidem.org FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Drug/alcohol resources (Outside Tr)
FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Connie Miller

ADDRESS: 2309 SW 1st # 841

CITY/STATE/ZIP: POX OR 97201

PHONE: DAYS: 503 234-8404 EVES: 503 736 9863

EMAIL: _____ FAX: _____

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): DCHS ✓

Mental Health

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Lynda Castle CATHOLIC CHARITIES

ADDRESS: 3009 NE John DIRECTOR

CITY/STATE/ZIP: PDX, OR 97213

PHONE: DAYS: (503) 309-4519 EVES: _____

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 05/29/2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Latino Network

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Maria Fernanda Diaz Bonilla

ADDRESS: 2724 NE Halsey St.

CITY/STATE/ZIP: Portland, OR 97232

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

Latino Network

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC ✓

NAME: Caroling Rosales Alcocer

ADDRESS: 1066 SE 190 th Ave

CITY/STATE/ZIP: Portland Or 97233

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5-29-13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): OC HIS

FOR: AGAINST: THE ABOVE BUDGET TOPIC

NAME: Richard Nitki

ADDRESS: 7780 SW Capital Hill

CITY/STATE/ZIP: PORTLAND OR 97219

PHONE: DAYS: 503 246-1634 x111 EVES: _____

EMAIL: rnitki@nlwco.org FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/2013

AGENDA ITEM: DE PAUL TREATMENT FUNDING FOR
ADOLESCENTS

FOR: _____ AGAINST: _____

NAME: CHRIS FARENTINOS

CONTACT INFORMATION (optional):

ADDRESS: 4838 NE 14th Place

CITY/STATE/ZIP: Portland OR 97211

PHONE: 503 7061633 EMAIL: chrisf@depaul-treatment
centers.org

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

1. Complete this form and submit to the Board Clerk.
2. Presenters are called to testify in the order their form is received. The Presiding Officer may rearrange testimony or may ask Invited Guests or Elected Officials to speak first.
3. Public testimony is limited to **3 minutes or less** per person unless otherwise directed by the Presiding Officer.
4. Written materials may be submitted to the Board Clerk for distribution to the Board and entry in the official record. Please provide 7 copies.
5. All meetings are audio and video recorded.
6. When your name is called, come forward & be seated at the presenter's table; state your name for the record and speak clearly into the microphone.
7. A buzzer will signify the end of your allotted time.
8. The Presiding Officer has authority to keep order and may impose reasonable restrictions necessary for the efficient and orderly conduct of a meeting. Any person who fails to comply with reasonable rules of conduct or who creates a disturbance may be asked or required to leave and upon failure to do so becomes a trespasser.

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Health
Youth Alcohol & Drug Treatment.

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Harry B. Wilson TREASURER

ADDRESS: 5727 NE 15th Ave. DE PAUL

CITY/STATE/ZIP: Portland, OR TREATMENT CENTER

PHONE: DAYS: ~~503-766-6235~~ EVES: 503-295-3085

EMAIL: harrywilson@mhqm.com FAX: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

1. Please complete this form and submit to the Board Clerk.
2. Submittal of this form at the beginning of the meeting is appreciated.
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2. Written testimony will be entered into the official record.

MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

Please complete this form and return to the Board Clerk
This form is a public record

MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): STRA

El Programa Hispano

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC ✓

NAME: Graciela Montiel

ADDRESS: 138 NE 320

CITY/STATE/ZIP: Gresham, OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5-29-2013

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: ALAN HOFFMANN COALITION

ADDRESS: 5120 SE Henry St SUSTAINABILITY
ENVIRONMENT

CITY/STATE/ZIP: Portland / OR / 97206 25 ACRE PARK
FORMER LANDFILL

PHONE: _____ DAYS: 503.980.5260 EVES: _____

EMAIL: alan.hoffmann@multco.us FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): NAYA
Homeless Youth

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

✓ NAME: Martin Estrada - Marco Dominguez

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

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MEETING DATE: _____

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Judy Dwyer Judy Dwyer

ADDRESS: 420 Mason

CITY/STATE/ZIP: Port

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): LATINO Network
Community Hearing Initiative CH

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Raudel Leon

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP**

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MEETING DATE: 5/29/13

SUBJECT: Multnomah County Fiscal Year 2014 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Healthy Start

FOR: AGAINST: _____ THE ABOVE BUDGET TOPIC X

NAME: Tiffany Norton

ADDRESS: 3004 SE 71st Ave

CITY/STATE/ZIP: Portland OR 97206

PHONE: DAYS: 5037025477

EVES: _____

EMAIL: tntantiff@hotmail.com

FAX: _____

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