

**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 2010-2011 Budget**

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): FUNDING FOR

GARK NETWORK

FOR: ☒ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: TONY LOPEZ

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

2

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SUBJECT: **Multnomah County 2010-2011 Budget**

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): BUDGET FOR
GALE NETWORK

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: JONATHAN LORUSSO

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): FUNDING FOR
GANG NETWORK

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: BRIANNA MUNDO

ADDRESS: 222 3rd St Penthouse

CITY/STATE/ZIP: OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): GANG NETWORK

BUDGET

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: ARON MUÑOZ

ADDRESS: 1204 POWELL RD.

CITY/STATE/ZIP: PORTLAND OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): FUNDING FOR

GANT NETWORK

FOR: ☒ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: NANCY VILLANUEVA

ADDRESS: 227 POWELL ST

CITY/STATE/ZIP: GRESHAM OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): FUNDING FOR

GANG NETWORK

FOR: ☒ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: GUADALUPE VILLANUEVA

ADDRESS: 138 NR 7TH ST

CITY/STATE/ZIP: GRESHAM OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): FUNDING FOR
GANG NETWORK

FOR: ☒ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: JOSE LUIS VILLANUEVA

ADDRESS: 138 NE 300 ST

CITY/STATE/ZIP: GRESHAM OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): GANG NETWORK
FUNDING

FOR: ☒ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: MARIA VARGAS

ADDRESS: 2012 NE 6 LACHMANA ST.

CITY/STATE/ZIP: PORTLAND OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
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MEETING DATE: 5/25/10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): YGPS

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Kristyn Saephan

ADDRESS: 10239 NE Skidmore St.

CITY/STATE/ZIP: Portland OR 97220

PHONE: _____ DAYS: 503-257-6389 EVES: _____

EMAIL: Kristynsaephan@gmail.com FAX: _____

WRITTEN TESTIMONY: _____

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SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): YB YGPS

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Sabrina Valdefiera

ADDRESS: 4724 NE 99th Ave

CITY/STATE/ZIP: Portland, OR 97220

PHONE: _____ DAYS: 971 506 8339 EVES: 971 506 8339

EMAIL: Sabrina-valdefiera@yahoo.com FAX: _____

WRITTEN TESTIMONY: _____

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MULTNOMAH COUNTY BOARD OF COMMISSIONERS
PUBLIC TESTIMONY SIGN-UP

14
VOTE
LAST

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MEETING DATE: 5/29/10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Both

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: Renee Salas

R.

SDUS

ADDRESS: 4427 no 131st ph AP B7

CITY/STATE/ZIP: portland or 97230

PHONE: _____

DAYS: _____

EVES: _____

EMAIL: _____

FAX: _____

WRITTEN TESTIMONY: _____

how These programs help children
out of the street. ~~that~~ ~~is~~
And how ~~this~~ ~~program~~
helped me learn about my culture

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
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Please complete this form and return to the Board Clerk
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MEETING DATE: 05/25/2020

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): API- SSES

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: YELIN BOSCO

ADDRESS: 16166 SE CARLITHERS STREETS APT 2

CITY/STATE/ZIP: Portland OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: boscoyelin@gmail.com FAX: _____

WRITTEN TESTIMONY: _____

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SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SSSES / YGPS

FOR: ~~SSSES~~ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Kara Houa

ADDRESS: 4544 NE 88th AVE

CITY/STATE/ZIP: Portland, Or, 97220

PHONE: _____ DAYS: 503-252-3724 EVES: _____

EMAIL: mkoun93@yahoo.com FAX: _____

WRITTEN TESTIMONY: _____

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MEETING DATE: _____

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Mark Montes

ADDRESS: 3029 NE 122nd Ave.

CITY/STATE/ZIP: Portland OR. 97230

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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MEETING DATE: _____

SUBJECT: **Multnomah County 2010-2011 Budget**

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): YEPS

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Trung - Tini- Tran

ADDRESS: 4017 NE 132nd Pl

CITY/STATE/ZIP: Portland OR 97230

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: AYS is an essential and vital necessity
in us teens. We need the wisdom and
knowledge of our mentors and leaders to
direct us in a path in which we may
successfully advance into our future

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(15)

**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: May 25, 2010

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): SSSES

funding for Waya

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: Davineekah White Elk

ADDRESS: ¹⁵³⁰NE 65th AVE

CITY/STATE/ZIP: Portland, OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
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MEETING DATE: 5/25

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Gang

Prevention Funding

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: Dre Collins

ADDRESS: _____

CITY/STATE/ZIP: Portland OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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**MULTNOMAH COUNTY BOARD OF COMMISSIONERS
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MEETING DATE: 5.25.10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Rental ASSISTANCE

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Jason Bessette

ADDRESS: 453 SE. 111th

CITY/STATE/ZIP: Portland, Oregon 97216

PHONE: _____ DAYS: 503.960.2907 EVES: _____

EMAIL: jasonbessette@clear.net FAX: _____

WRITTEN TESTIMONY: I Jason Bessette am so thankful for the help that ALCO has given me and my family. They treated me with respect and dignity and have allowed an opportunity to catch up and be on a safe living level. Without their help I would have been evicted and not been able to see the light! Thank you ALCO!!

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MEETING DATE: May 25th 2010

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM):

Parenting education and community presentation

FOR: V AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Greg Chizh

ADDRESS: 20525 NE Sandy BLVD

CITY/STATE/ZIP: Fairview, OR, 97024

PHONE: DAYS: 503-575-1951

EVES: _____

EMAIL: PortlandSCC@gmail.com

FAX: _____

WRITTEN TESTIMONY:

(in my folder)
given on request

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SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): APF-SSSES

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: Hudin

ADDRESS: 2135 SE 122nd AVE APT #9

CITY/STATE/ZIP: Portland, OR 97233

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: sa-hudin@yahoo.com FAX: _____

WRITTEN TESTIMONY: _____

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SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Lily Lai Thang

ADDRESS: 16166 SE Caruthers APT. #2

CITY/STATE/ZIP: Portland O-R

PHONE: _____ DAYS: 503762-0820

EVES: _____

EMAIL: Lily6907@gmail.com

FAX: _____

WRITTEN TESTIMONY: _____

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SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): API - SSES

FOR: X **AGAINST:** _____ **THE ABOVE BUDGET TOPIC**

NAME: Tan bow bow

ADDRESS: 2118 SE 122nd AVE

CITY/STATE/ZIP: Portland, OR 97233

PHONE: _____ **DAYS:** 503-253-3500 **EVES:** _____

EMAIL: Tanbow150@gmail.com **FAX:** _____

WRITTEN TESTIMONY: _____

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(2)
✓

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SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): APE - SSSSES

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Jameela

ADDRESS: 2119 S.E 122nd Ave Apt. 205

CITY/STATE/ZIP: Portland, OR, 97233

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: jameela599@gmail.com FAX: _____

WRITTEN TESTIMONY: _____

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SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM):

Cultural Specific Services

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: William Miller

ADDRESS: 13611 SE Claybourn

CITY/STATE/ZIP: Portland, OR 97236

PHONE: X DAYS: 503-839-4091 EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

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(24) ✓

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MEETING DATE: 05/25/2010

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM):

Homeless Youth Services Programs

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Ava Hansen

ADDRESS: 5135 NE Columbia Blvd.

CITY/STATE/ZIP: Portland, OR 97218

PHONE: DAYS: 503-288-8177

EVES: _____

EMAIL: avahd@navapdx.org

FAX: 503-288-1260

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

(25)
✓

**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 25, 2010

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Rent assistance

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC
NAME: Jen Matheson / NAYAFamily Center

ADDRESS: 5128 NE Columbia Blvd

CITY/STATE/ZIP: Portland, OR 97218

PHONE: _____ DAYS: 503/421-9632 EVES: _____

EMAIL: jenm@naya.org FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
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: 5/25/10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM):

Culturally Specific Wrap Around Services

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Jeanne Davidson

ADDRESS: 8203 N. Fessenden St. #2

CITY/STATE/ZIP: Portland, Ore. 97203

PHONE: _____ DAYS: 503 380 9809 EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

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2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

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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: 9/25

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): FUNDING
FOR GSNH NETWORK

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: KRIST PEARSON

ADDRESS: 2012 COLUMBIA

CITY/STATE/ZIP: PORTLAND, OR

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

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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: 5/25

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): GANG NETWORK
FUNDING

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: MARVIN RODRIGUEZ

ADDRESS: 222 PENNA RD.

CITY/STATE/ZIP: GRESHAM OR 97030

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

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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: 5-25-10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

SERVICES to LOW income, minority & mental Health

FOR: ☒ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Sherry L. Addis

ADDRESS: 12790 SE Stark St

CITY/STATE/ZIP: Portland, OR 97230

PHONE: _____ DAYS: 503 238 1512 EVES: 503 254-9117

EMAIL: Sherrya@CTS1.NSN.US FAX: 503 238-~~151~~2436

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

(31) ✓

**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 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): _____

FOR: _____ AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Marcus Mundy

ADDRESS: 10 N. Russell St

CITY/STATE/ZIP: Pdx 97227

PHONE: _____ DAYS: 503 280 2600 EVES: _____

EMAIL: mmundy@olpdx.org FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

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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: 5/25/10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM):

Multnomah County
Project Independence, Oregon Project Independence

FOR: ☒ AGAINST: ☐ THE ABOVE BUDGET TOPIC

NAME: Darvel Lloyd

ADDRESS: 54 SE. 74th Ave.

CITY/STATE/ZIP: Portland, OR 97215

PHONE: DAYS: 503-251-278 EVES: Same

EMAIL: darvel@clear.net FAX: _____

WRITTEN TESTIMONY: I'm glad to see that M.C. Proj.

Independence has been added back into your proposed
budget. The program has been very effective in
keeping disabled people from age 19 to 59 in
their own their own homes and apartments. I certainly
hope ~~that~~ that Oregon Project Independence programs
will not be cut, given the latest state budget
shortfall estimates!

IF YOU WISH TO ADDRESS THE BOARD:

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2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
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IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

35
✓

**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: 5/25/10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): TRCO's
Domestic Violence Program

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Diana Lee

ADDRESS: 10301 NE Glisan Street

CITY/STATE/ZIP: Portland, OR 97220

PHONE: _____ DAYS: 971.227.5614 EVES: _____

EMAIL: diana.lee@mail.trco.org FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
4. If written documentation is presented, please furnish one copy to the Board Clerk.

IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

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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: 5/25/10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): IRLOS
Domestic Violence Program

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: Fang Qing Feng

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

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2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
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IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

(36)
✓

**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: 5.25.10

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM):

Proposed GEO ~~Budget~~ Cut @ Inverness Jail

FOR: _____ AGAINST: X THE ABOVE BUDGET TOPIC

NAME: Kristin Casey

ADDRESS: 3530 SE 26th Ave

CITY/STATE/ZIP: Portland OR 97202

PHONE: _____ DAYS: 503 988 5457 EVES: 503 754-7291

EMAIL: kcasey@mesd.k12.or.us FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
3. State your name for the official record.
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IF YOU WISH TO SUBMIT WRITTEN COMMENTS TO THE BOARD:

1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.

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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: 5/25 /2010

SUBJECT: Multnomah County 2010-2011 Budget

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): Cutting the
OED Program at the Multnomah County Jail's.

FOR: _____ AGAINST: X THE ABOVE BUDGET TOPIC

NAME: Julie Brand

ADDRESS: 11611 NE Airswath Circle

CITY/STATE/ZIP: Portland, OR 97233

PHONE: _____ DAYS: 503-779-5715 EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

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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: 5/25/10

SUBJECT: Multnomah County 2010-2011 Budget APT-SSSES

SPECIFIC BUDGET TOPIC (DEPARTMENT OR PROGRAM): APT-SSSES

FOR: X AGAINST: _____ THE ABOVE BUDGET TOPIC

NAME: ~~Bob~~ Dah Eh

ADDRESS: 206256122nd AVE

CITY/STATE/ZIP: Portland, OR 97233

PHONE: _____ DAYS: _____ EVES: _____

EMAIL: _____ FAX: _____

WRITTEN TESTIMONY: _____

IF YOU WISH TO ADDRESS THE BOARD:

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2. Address the County Commissioners from the presenter table microphones. Please limit your comments to **3 minutes**.
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1. Please complete this form and return to the Board Clerk.
2. Written testimony will be entered into the official record.