REQUEST TO SPEAK IN OPPOSITION of the RECOMMENDATION(S) 

PLEASE PRINT LEGIBLY Information provided on this form is part of the public record.

Susan Brinchman
First Name Last Name
PO Box 655
Address
La Mesa CA 91944
City State Zip
Phone Number
Center for Electrosmgog Prevention
Organization or company, if any

Check one box below:
☒ I would like to speak as an individual.
☐ I do not need to speak if the item is approved on consent.
☐ I would like to register my position, but I do not wish to speak.

☐ I request to speak as part of an organized presentation. 
Organized presentations consist of three or more individuals, each of whom must provide substantive testimony. Organized presentations are at the discretion of the Chair. Please attach speaker slips for all speakers.

PLEASE SEE REVERSE FOR SPEAKER'S GUIDE
REQUEST TO SPEAK IN OPPOSITION
of the RECOMMENDATION(S)

Information provided on this form is part of the public record.

First Name: Beverly
Last Name: Raimondo
Address: 4911 1/2 Del Mar
City: San Diego
State: CA
Zip: 92107
Phone Number:

Organization or company, if any:

Check one box below:

☐ I would like to speak as an individual.
☐ I do not need to speak if the item is approved on consent.
☒ I would like to register my position, but I do not wish to speak.

No Consent to High Radiation near home, schools.

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(Rev. 10/19)
REQUEST TO SPEAK IN OPPOSITION
of the RECOMMENDATION(S)

Michael FARRAHER

2430 Business Pk DC

VISTA CA 92081

(619) 630-6391

Verizon Wireless

I would like to speak as an individual.

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I would like to register my position, but I do not wish to speak.

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PLEASE PRINT LEGIBLY

Information provided on this form is part of the public record.

Rob Baldwin

4424 Areca Dr

San Diego, CA 92116

619-299-2169

Christine Moore

650 Robinson Ave

San Diego, CA 92103

619-200-3819

AT&T

Check one box below:

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REQUEST TO SPEAK
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PLEASE PRINT LEGIBLY
Information provided on this form is part of the public record.

First Name  John
Last Name  Osborne
Address  650 Robinson AVE
City  San Diego
State  CA
Zip  92103
Phone Number  619-200-3024

Organization or company, if any
AT&T

Check one box below:

☐ I would like to speak as an individual.
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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE
<table>
<thead>
<tr>
<th>Date</th>
<th>8/7/19</th>
<th>6</th>
<th>Agenda Item #</th>
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<tbody>
<tr>
<td>Subject</td>
<td>SG County Approval</td>
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**REQUEST TO SPEAK IN OPPOSITION of the RECOMMENDATION(S)**

**PLEASE PRINT LEGIBLY**

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<table>
<thead>
<tr>
<th>First Name</th>
<th>Mahoney</th>
<th>Last Name</th>
<th>Mahoney</th>
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</thead>
<tbody>
<tr>
<td>Address</td>
<td>13411 Appalachian Way</td>
<td></td>
<td>1271 Weaver St.</td>
</tr>
<tr>
<td>City</td>
<td>San Diego</td>
<td>State</td>
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</tr>
<tr>
<td>Zip</td>
<td>92114</td>
<td></td>
<td>92114</td>
</tr>
<tr>
<td>Phone Number</td>
<td>858-240-6405</td>
<td></td>
<td>323-382-1987</td>
</tr>
</tbody>
</table>

**Organization or company, if any**

**Check one box below:**

- [ ] I would like to speak as an individual.
- [x] I do not need to speak if the item is approved on consent.
- [ ] I would like to register my position, but I do not wish to speak.

**PLEASE SEE REVERSE FOR SPEAKER’S GUIDE**
REQUEST TO SPEAK
IN OPPOSITION
of the RECOMMENDATION(S)

PLEASE PRINT LEGIBLY
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First Name: Mair
Last Name: Rathburn
Address: 4615 Hinson Pk
City: San Diego
State: CA
Zip: 92115
Phone Number: 619-229-9991

Organization or company, if any: We are the vibrant... Communications Workers of America local 9504

Check one box below:
☑ I would like to speak as an individual.
☐ I do not need to speak if the item is approved on consent.
☐ I would like to register my position, but I do not wish to speak.

PLEASE SEE REVERSE FOR SPEAKER’S GUIDE
REQUEST TO SPEAK
IN OPPOSITION
of the RECOMMENDATION(S)

Nancy Lemko
First Name: Nancy
Last Name: Lemko
Address: 3597 Lomasitoe Ln
City: Sanita
State: CA
Zip: 91902
Phone Number: 619-472-0471

Organization or company, if any

Check one box below:
☐ I would like to speak as an individual.
☐ I do not need to speak if the item is approved on consent.
☐ I would like to register my position, but I do not wish to speak.

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PLEASE SEE REVERSE FOR SPEAKER'S GUIDE
REQUEST TO SPEAK IN OPPOSITION

Date: Aug 7, 2019

Small Cell Wireless Ordinance

Subject:

First Name: Holly
Last Name: Magan
Address: 27090 El Mirador
City: Rancho Santa Fe, Ca
Zip: 92067
Phone Number: 558-398-5287
Organization or company, if any: Concerned Citizens of North County

Check one box below:

☐ I would like to speak as an individual.
☐ I do not need to speak if the item is approved on consent.
☐ I would like to register my position, but I do not wish to speak.

NOTE: ORGANIZED PRESENTATION: If you request to speak as part of an organized presentation, each of whom must provide substantive testimony. Organized presentations are at the discretion of the Chair. Please attach speaker slips for all speakers.
REQUEST TO SPEAK IN OPPOSITION
of the RECOMMENDATION(S)

PLEASE PRINT LEGIBLY
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First Name: Beth
Last Name: Nelson
Address: Rancho Santa Fe CA 92067
City: Rancho Santa Fe
State: CA
Zip: 92067
Phone Number: 858-553-5773

 Concerned citizens of North County

Check one box below:

☐ I would like to speak as an individual.
☐ I do not need to speak if the item is approved on consent.
☐ I would like to register my position, but I do not wish to speak.

☐ I request to speak as part of an organized presentation.

I oppose the deployment of 5G technology into our communities, as it is proven to be hazardous to health.

Please see reverse for speaker's guide

Rev. 07/06

[ signatures ]

Requests to Speak in Opponion
of the RECOMMENDATION(S)

PLEASE PRINT LEGIBLY
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First Name: Patricia
Last Name: Gracian
Address: 4609 Shoshoni Ave
City: San Diego
State: CA
Zip: 92117
Phone Number: 858-270-5725

Check one box below:

☐ I would like to speak as an individual.
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Rev. 07/06