

The City welcomes your comments and requests that you present your remarks in a respectful manner, within established time limits, and focus on issues which directly affect the City or are within the jurisdiction. Thank you for your testimony.

Meeting Date: 8/26/2015

City of  
**SACRAMENTO**

# Request to Speak

Complete this form and  
return to the City Clerk

COMMENTS MAY BE LIMITED TO A SPECIFIC TIME ALLOTMENT

☐ Matters Listed on the Agenda

Agenda Item No: 4

Subject: Security Guard Services

☐ In Favor

☒ Oppose

☐ Matters **NOT** Listed on the Agenda

Subject: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Personal Information:

Except for your name, the information requested below is voluntary and used by staff to contact you if necessary. When you request to speak before the legislative body, your name is included in the City's Official minutes. This form is subject to disclosure under the California Public Records Request Act.

Name: Armando Flores Address: 448 Howe Ave

Organization/Business Name: C.I.A. F.T.E.

Council District No.: \_\_\_\_\_

☐ Not a City Resident

Phone: (916) 799-6652

Email: \_\_\_\_\_

## Notice to Lobbyist:

In compliance with City Code Section 2.15.150 you **MUST** identify yourself as a lobbyist and also verbally identify the client(s), business or organization you are representing.

I am a: ☐ Registered Lobbyist

☐ Unregistered Lobbyist

I represent: \_\_\_\_\_

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Meeting Date: 8-25-15

City of  
**SACRAMENTO**

# Request to Speak

Complete this form and  
return to the City Clerk

COMMENTS MAY BE LIMITED TO A SPECIFIC TIME ALLOTMENT

☐ Matters Listed on the Agenda

Agenda Item No: 6

Subject: UNIFORMED SERVICES

☒ In Favor

☐ Oppose

☐ Matters **NOT** Listed on the Agenda

Subject: \_\_\_\_\_

## Personal Information:

Except for your name, the information requested below is voluntary and used by staff to contact you if necessary. When you request to speak before the legislative body, your name is included in the City's Official minutes. This form is subject to disclosure under the California Public Records Request Act.

Name: CHARLES WITZEL Address: 3200 TAYLOR RD 257

Organization/Business Name: SECURITYS SECURITY

Council District No.: \_\_\_\_\_

☐ Not a City Resident

Phone: ( 916 ) 254-6478

Email: \_\_\_\_\_

## Notice to Lobbyist:

In compliance with City Code Section 2.15.150 you **MUST** identify yourself as a lobbyist and also verbally identify the client(s), business or organization you are representing.

I am a: ☐ Registered Lobbyist

☒ Unregistered Lobbyist

I represent: MYSELF / EMPLOYEE OF SECURITYS

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City of  
**SACRAMENTO**

# Request to Speak

Complete this form and  
return to the City Clerk

Meeting Date: 8-25-15

COMMENTS MAY BE LIMITED TO A SPECIFIC TIME ALLOTMENT

☐ Matters Listed on the Agenda

Agenda Item No: 6

Subject: SECURITY OFFICER

☒ In Favor

☐ Oppose

☐ Matters **NOT** Listed on the Agenda

Subject: \_\_\_\_\_

## Personal Information:

Except for your name, the information requested below is voluntary and used by staff to contact you if necessary. When you request to speak before the legislative body, your name is included in the City's Official minutes. This form is subject to disclosure under the California Public Records Request Act.

Name: STEVE WILLBROOK Address: P.O. BOX 15522

Organization/Business Name: SECURITY SECURITY

Council District No.: \_\_\_\_\_

☐ Not a City Resident

Phone: (916) 247-7048

Email: \_\_\_\_\_

## Notice to Lobbyist:

In compliance with City Code Section 2.15.150 you **MUST** identify yourself as a lobbyist and also verbally identify the client(s), business or organization you are representing.

I am a: ☐ Registered Lobbyist

☐ Unregistered Lobbyist

I represent: SECURITAS SECURITY

The City welcomes your comments and requests that you present your remarks in a respectful manner, within established time limits, and focus on issues which directly affect the City or are within the jurisdiction. Thank you for your testimony.

Meeting Date: 8/29/15

City of  
**SACRAMENTO**

## Request to Speak

Complete this form and return to the City Clerk

COMMENTS MAY BE LIMITED TO A SPECIFIC TIME ALLOTMENT

☒ Matters Listed on the Agenda

Agenda Item No: 6

Subject: UNIFORMED SECURITY

☒ In Favor

☐ Oppose

☐ Matters **NOT** Listed on the Agenda

Subject: \_\_\_\_\_

### Personal Information:

Except for your name, the information requested below is voluntary and used by staff to contact you if necessary. When you request to speak before the legislative body, your name is included in the City's Official minutes. This form is subject to disclosure under the California Public Records Request Act.

Name: Albert Silva Address: 807 Reuter Dr

Organization/Business Name: \_\_\_\_\_

Council District No.: \_\_\_\_\_

☒ Not a City Resident ~~albertsilva118@gmail.net~~

Phone: (916) 296-6328

Email: ~~albertsilva118@gmail.net~~  
albertsilva@albertsilva1182@att.net

### Notice to Lobbyist:

In compliance with City Code Section 2.15.150 you **MUST** identify yourself as a lobbyist and also verbally identify the client(s), business or organization you are representing.

I am a: ☐ Registered Lobbyist ☒ Unregistered Lobbyist

I represent: Myself with SECURITAS

City of  
**SACRAMENTO**

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# Request to Speak

Meeting Date: 08/25/2015

Complete this form and  
return to the City Clerk

## COMMENTS MAY BE LIMITED TO A SPECIFIC TIME ALLOTMENT

☒ Matters Listed on the Agenda

Agenda Item No: 6

Subject: To thank Councilor  
public works.

☒ In Favor

☐ Oppose

☒ Matters **NOT** Listed on the Agenda

Subject: \_\_\_\_\_

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Name: BREANNAH WATT Address: 915 T STREET

Organization/Business Name: SECURITAS

Council District No.: 2

☐ Not a City Resident

Phone: (916) 808.1331

Email: BWATTS@CITYofsacramento.org

## Notice to Lobbyist:

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I am a: ☐ Registered Lobbyist

☐ Unregistered Lobbyist

I represent: \_\_\_\_\_

✓

City of  
**SACRAMENTO**

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## Request to Speak

Complete this form and return to the City Clerk

Meeting Date: 08/25/2015

COMMENTS MAY BE LIMITED TO A SPECIFIC TIME ALLOTMENT

☒ Matters Listed on the Agenda

Agenda Item No: 6

Subject: ABOUT SECURITAS

☒ In Favor

☐ Oppose

☒ Matters **NOT** Listed on the Agenda

Subject: \_\_\_\_\_  
\_\_\_\_\_  
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### Personal Information:

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Name: Myisha Patterson Address: 915 1 STREET

Organization/Business Name: SECURITAS

Council District No.: \_\_\_\_\_ ☐ Not a City Resident

Phone: (916) 803-1306 Email: mpatterson@City of sacram-  
ento-org

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I am a: ☐ Registered Lobbyist ☐ Unregistered Lobbyist

I represent: \_\_\_\_\_