General Public Comment One COUNTY One COUNTY Date: 10/21/25
FUTURE Date: 10/20/25
Name: Marus
(Print Name Clearly)
Phonetic Spelling:
(In an effort to pronounce names correctly please provide phonetic spelling)
Contact Information (optional):(Phone Number Including Area Code)
(Email Address)
Representing (optional): Community Environment (Organization, etc.)
All individual speakers and organized presentations to the Board of Supervisors are subject to time limits imposed at the discretion of the Chair.
Persons desiring to address the Board of Supervisors must complete and deliver to the Clerk a speaker slip PRIOR to the commencement of the item.
When speaking, be brief, stay on subject, present only new information. When

one COUNTY Agenda Item #
Outros FUTURE Date: 10/21/25
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When speaking, be brief, stay on subject, present only new information. When testifying before the Board of Supervisors, personal attacks and other disruptive behavior is not appropriate.
(The Clerk will call you to the microphone at the appropriate time)
PLEASE SEE REVERSE FOR BOARD MEETING PROTOCOLS

O SAN ONE COUNTY	General Public Comment Agenda Item #
FUTURE FUTURE	Date: 10/21/25
Name: Haley Enley	~ S
(Print Na	ame Clearly)
Phonetic Spelling:	
(In an effort to pronounce names co	rrectly please provide phonetic spelling
Contact Information (optional):	(Phone Number Including Area Code)
	ddress)
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(The Clerk will call you to the mic	rophone at the appropriate time)

One COUNTY One FUTURE	General Public Comment Agenda Item # Date:(
Name: KatiC	Dans
	Name Clearly)
Phonetic Spelling:(In an effort to pronounce names o	correctly please provide phonetic spelling
Contact Information (optional):	(Phone Number Including Area Code)
/F	
(Email	Address)
Representing (optional):	(Organization, etc.)
ll individual speakers and organized p	resentations to the Board of Supervisors are

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General Public Comment

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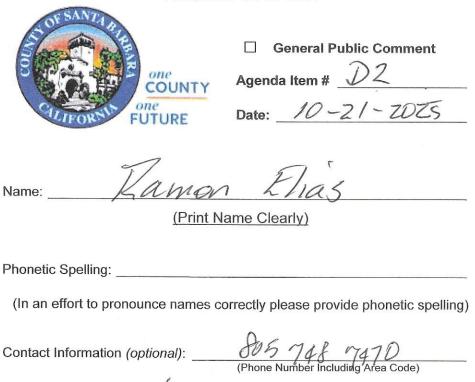
Date: 0221, 2024

Name: Colin Jones
(Print Name Clearly)
Phonetic Spelling:
(In an effort to pronounce names correctly please provide phonetic spelling
Contact Information (optional):(Phone Number Including Area Code)
CNJJONES Q gmart. com (Email Address)
(Email Address)
Representing (optional): Leave of Women oters (Organization, etc.)
V (Organization, etc.)
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Representing (optional): _____(Organization, etc.)

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