

Committee: Special Community and Economic Development Committee Meeting
Date: 3/2/09
Regarding: Item 1.
080218 - An ordinance incorporating code provisions - apprenticeship requirements for construction contracts, participation of city residents in public works contracts, the emerging business enterprise program - into a single chapter, and creating new provisions establishing requirements for developers receiving direct financial assistance from the city, and local business enterprise contracting standards.
Name: KIRSTEN THOMPSON
Your Name Phonetically (If you wish to speak):
Address: 4920 W. Hoyf Pl
City: M. /w ZIP Code: 332/6
Organization: (if any): MICAH
E-Mail Address: (Unless specifically requested not to, we will be contacting you via e-mail.)
X I support this measureI wish to speak
I don't support this measureI do not wish to speak



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Your Name Phonetically (If you wish to speak):
Address: 920 & Pleasant #2 City: M. Wouker, W' ZIP Code: 53202
City: Milwonker, W' ZIP Code: 53202
Organization: (if any):
E-Mail Address:
(Unless specifically requested not to, we will be contacting you via e-mail.)
I support this measure I wish to speak
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Name: Ka Haleen Mulligan. +	lansel
Your Name Phonetically (If you wish to speak):	
Address: 3314 W Brewen &	•
City: Mily	ZIP Code: 53212
City: Mily Corganization: (if any): Partnership for	working Families
E-Mail Address:)
(Unless specifically requested not to, we will be contact	eting you via e-mail.)
X I support this measure	I wish to speak
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Your Name Phonetically (If you wish to speak):
Address: 3158 N. Humboldt Blod.
City: Milwanher ZIP Code: 53212
Organization: (if any): Citizen Letion of WI
E-Mail Address:
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Name: Reu Andrew Warner		
Your Name Phonetically (If you wish to speak):		
Address (W) Plymouth Church UCC, 2717 E. Hornpoline &		
City: Milw ZIP Code: 532 V		
Organization: (if any): Pyrhouth UCC /MICAH		
E-Mail Address: (Unless specifically requested not to, we will be contacting you via e-mail.)		
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Name: ERIC Gunderson		
Your Name Phonetically (If you wish to speak):		,
Address: 2511 N. Gordo	~ Cou	
Your Name Phonetically (If you wish to speak): Address: 2511 N. Gordo City:	ZIP Code:	5321a
Organization: (if any):		
E-Mail Address:		
(Unless specifically requested not to, we will be contact	ting you via e-n	nail.)
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Your Name Phonetically (If you wish to speak):
Address: 1633 N. PROSPECT AVE. #14 B
City: MILW ZIP Code: 53202
Organization: (if any):
E-Mail Address: H GUEQUIERRED @ 58C GLOBAL. NE (Unless specifically requested not to, we will be contacting you via e-mail.)
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Name: Denis Euequierra
Your Name Phonetically (If you wish to speak):
Address: 1633 N. Prospect 14B
Address: 1633 N. Prospect 14B City: Milwankee ZIP Code: 53702
Organization: (if any):
E-Mail Address: (Unless specifically requested not to, we will be contacting you via e-mail.)
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Name: MARVIN WALKEN
Your Name Phonetically (If you wish to speak):
Address: Zol W. COVENTRY ET Suite 316
City: GleNDAS ZIP Code: 53217
Organization: (if any): MANVIN L. WALKEN & ASSOCIATES, INT
E-Mail Address: MARVIN WALKER 7 & AoL , Zon- (Unless specifically requested not to, we will be contacting you via e-mail.)
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Name: Mary Devitt	
Your Name Phonetically (If you wish to speak):	
Address: 721 W Monrovia	Ave
	ZIP Code: 53217
Organization: (if any): MICAH	
E-Mail Address: m/devitt a am	
(Unless specifically requested not to, we will be contact	ting you via e-mail.)
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Your Name Phonetically (If you wish to speak): Address: 76 47 W 44 54	
	<u>ーー・</u>
City:Z	IP Code: <u>53223</u>
Organization: (if any): MICAH	
E-Mail Address: Mail along Sh (Unless specifically requested not to, we will be contacting	eglobal, net g you via e-mail.)
I support this measure	I wish to speak

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Name: Zachary Devitt	
Your Name Phonetically (If you wish to speak):	
Address: 721 W. Monravia Ave.	
City: 6 lendale	ZIP Code: 532/7
Organization: (if any): MICAH	
E-Mail Address:	
(Unless specifically requested not to, we will be contact	ting you via e-mail.)
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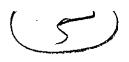
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Address: 1200 W NORTH AVC
City: M. LUNULSE ZIP Code: 53205
Organization: (if any):
E-Mail Address: (Unless specifically requested not to, we will be contacting you via e-mail.)
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Name: S'andra Chapmon
Your Name Phonetically (If you wish to speak):
Address: 6742 N 108 5 Streat
City: Milwaukte ZIP Code: 53224 Organization: (if any): Cross Lu theran Church
Organization: (if any): Choss Lu theran Church
E-Mail Address: Sandra. Lhap man 2 Wiscons in. 302
(Unless specifically requested not to, we will be contacting you via e-mail.)
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Name: MALEOLA GLES
Your Name Phonetically (If you wish to speak):
Address: 4822 N. Z4T# Pl.
City: MILWAULEE ZIP Code: 53209
Organization: (if any):
E-Mail Address: LEITHLy 65 & GAHOW COLF (Unless specifically requested not to, we will be contacting you via e-mail.)
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Your Name Phonetically (If you wish to speak):
Address: 1633 N. Prospect #40
City: ZIP Code: 53 202
Organization: (if any):
E-Mail Address: Chilo Cy (Wallow Co.C.) M (Unless specifically requested not to, we will be contacting you via e-mail.)
I support this measureI wish to speak
I don't support this measureI do not wish to speak
PH (414) 347-0353



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Name: James Ito		
Your Name Phonetically (If you wish to speak):		
Address: 3362 N. Bremen St.		
City: Milwaukee ZIP Code: 53212		
Organization: (if any):		
E-Mail Address: (Unless specifically requested not to, we will be contacting you via e-mail.)		
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Name: Sherman Jackson	L	
Your Name Phonetically (If you wish to speak):		
Address: 2922 N. 23rd Stre	uet	
City: Milman keece,	ZIP Code: 53206	
Organization: (if any): GJLN		
E-Mail Address: Shern jack 1949 (Unless specifically requested not to, we will be contact	ing you via e-mail.)	
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I don't support this measure	I do not wish to speak	