

OFFICE OF THE CITY CLERK  
CITY OF MILWAUKEE

REGISTRATION FORM

JOINT PUBLIC HEARING

October 9, 2017 at 6:30 P.M.

Council Chambers, 3rd Floor, City Hall

RE: Public Hearing on the Mayor's Proposed 2018 Executive Budget.

PLEASE PRINT

Name: ANTONIO L.

Address: \_\_\_\_\_

City: \_\_\_\_\_ ZIP CODE: 53207

Organization Represented (if any): COMMON GROUND

I wish to speak.

I do not wish to speak.

Interpreter

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PLEASE PRINT

Name: Nichole Yunk Todd

Address: 2621 N. Farwell Ave.

City: Milwaukee ZIP CODE: 53211

Organization Represented (if any): Wisconsin Community Services

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: TERI REGANO

Address: 1004 E BRADY ST.

City: MKE ZIP CODE: 53202

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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Name: Jay Tucker

Address: 3732 W WISCONSIN AVE

City: MILWAUKEE ZIP CODE: 53208

Organization Represented (if any): WISCONSIN COMMUNITY SERVICES

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: Jimmy Holte

Address: 1667 S. 26<sup>th</sup> St Apt #1

City: Milwaukee ZIP CODE: 53204

Organization Represented (if any): N/A

I wish to speak.

I do not wish to speak.

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RE: Public Hearing on the Mayor's Proposed 2018 Executive Budget.

PLEASE PRINT

Name:

Joel Peterson

Address: 3424 N 78<sup>th</sup>

City: Milwaukee

ZIP CODE: 53222

Organization Represented (if any): Library

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name:

CYNTHIA BIRCHWOOD

Address: 1667 S. 26 ST

City: MILW

ZIP CODE: 53214

Organization Represented (if any): COI FOR JUSTICE

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name:

Jaron Alexander

Address:

6701 N. 56th St

City:

Milwaukee

ZIP CODE:

53223

Organization Represented (if any):

People's Progressive Organizing Committee

I wish to speak.

I do not wish to speak.



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Name:

Nate Gilliam

Address: 9875 W. Menomonee Park Ct.

City: MBE

ZIP CODE: 53225

Organization Represented (if any): PPOC

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name:

Donna Olson

Address: 1687 N. Franklin Pl.

City: Milw

ZIP CODE: 53202

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: JIM CONWAY

Address: 1724 N. HUMBOLT AVE

City: MILN ZIP CODE: 53222

Organization Represented (if any): DRY HOOTCH

I wish to speak.

I do not wish to speak.

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Name: Deb Langkau

Address: 1132 E. Pleasant St. #2

City: Milw

ZIP CODE: 53202

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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Name: Alison Gima

Address: 1323 E. Hamilton St

City: Milwaukee ZIP CODE: 53202

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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Name: Rafael Garcia

Address: 3508 W. Kilbourn

City: Milwaukee ZIP CODE: 53208

Organization Represented (if any): Community First

I wish to speak.

I do not wish to speak.

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Name: Taffie Foster-Toney

Address: 2721 W. Roosevelt Dr.

City: Milwaukee ZIP CODE: 53216

Organization Represented (if any): Wisconsin Comm. Services  
CDLRE - Drivers License Recovery  
Program

I wish to speak.

I do not wish to speak.

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Name: John h. Buffington

Address: 9230 W. MT. VERNON AVE.

City: Milw ZIP CODE: 53226

Organization Represented (if any): NONE

I wish to speak.

I do not wish to speak.



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Name: Adam Germain

Address: 1515 N Cass St

City: Milwaukee ZIP CODE: 53202

Organization Represented (if any): Golden, Inc.

I wish to speak.

I do not wish to speak.

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Name: Seager, David

Address: \_\_\_\_\_

City: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

Organization Represented (if any): Milwaukee Professional Fire  
Fighters  
Association.

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: Julius Richards

Address: 2759 N 13th

City: Milwaukee ZIP CODE: 53206

Organization Represented (if any): AFSCME

I wish to speak.

I do not wish to speak.

No show

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Name: King Rick The Original Black Panther

Address: \_\_\_\_\_

City: Milw

ZIP CODE: 53215

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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Name: Pamela Frautschi

Address: 2430 E. Newberry

City: Milw ZIP CODE: 53211

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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Name: Annie Wacker

Address: 326 S 82nd St

City: Milwaukee ZIP CODE: 53214

Organization Represented (if any): AFSCME / Milwaukee

Area Labor  
Council

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: John Kaya

Address: 326 S. 52nd

City: Milwaukee ZIP CODE: 53214

Organization Represented (if any): None

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: Katherine Hannah

Address: 2336 W. Bremen

City: milw ZIP CODE: 53212

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.



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Name: "DON" Culpepper, Brandon

Address: 2913 N 18th St

City: Milwaukee ZIP CODE: 53206

Organization Represented (if any): PopNation LLC

I wish to speak.

I do not wish to speak.

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Name: TRASAS Wrayll

Address: 1103 W. Garfield Ave

City: MILW

ZIP CODE: 53205

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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Name: JoAnn Bishop

Address: 1030 E. Ogden Ave

City: Milw

ZIP CODE: 53202

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: BRYCE CLARK

Address: 1679 N Franklin Pl.

City: Milw. ZIP CODE: 53202

Organization Represented (if any):

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: Julie Bulgrin

Address: 1623 N. Astor

City: MKE, WI ZIP CODE: 53202

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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Name:

Kevin G. Corda

Address: 3642 S. 35<sup>th</sup> St.

City: Milwaukee

ZIP CODE: 53221

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: S. Winston

Address: 2322 N 5<sup>th</sup>

City: Mil ZIP CODE: 53216

Organization Represented (if any): Milwaukee

I wish to speak.

I do not wish to speak.

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Name: Kathleen Okerlund

Address: 2931 S. 57th St

City: Milwaukee ZIP CODE: 53219

Organization Represented (if any): Forestry

I wish to speak.

I do not wish to speak.



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PLEASE PRINT

Name: Sam Alford

Address: \_\_\_\_\_

City: Milwaukee ZIP CODE: 53206

Organization Represented (if any): \_\_\_\_\_

I wish to speak.

I do not wish to speak.

confine their remarks to no more than three minutes. Large groups of individuals who wish to make the same points should consider naming a spokesperson or two. If any person who wishes to speak has not yet registered, please do so in the lobby of this chamber.

10.PRESIDENT: *(After all speakers have had an opportunity to speak.)*  
Seeing no other person wishing to testify, this joint public hearing is closed.