REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Danid OV	ant
Address: 16634 P.2	N. B OX
City: Mlwarker	Zip Code: 53216
Organization Represented (if any):	
I wish to speak.	
	j.
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:1	Auora U Connell		
	3750 S. Howell Avenue		
City: M	ilw. Zip Code: 53207		
Organization Represented (if any): 1mpact 2-1-1			
X	I wish to speak.		
	I do not wish to speak.		

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	Mike H	neberg		<u> </u>
	每 1215			·
City:	Milw	WI	Zip Code: 53222	
Organiza	ation Represented (if	any): Inde a	Zip Code: 53222 endencefiret	
	I wish to spea			
	I do not wish	to speak.		

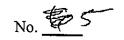
REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	Julie Alexander
	224 W State St # 1A
City: Was	unatosa WI Zip Code: 53213
Organization	n Represented (if any): Indepfirst
	I wish to speak.
	I do not wish to speak.



REGISTRATION FORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: IM BAACI	•
Address: 4260 N. Ho	TON STITEET
City: MIWANLEE	Zip Code: \$3212
Organization Represent	ed (if any): PATHFINDERS - SHELTER TASIL FORCE
I wish to	speak.
I do not	wish to speak.

No. 4746

OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Th	LE NOWA	KOWSKI	
Address:	122 le/5	Place	
City: MiL	WAUKEE	Wise	Zip Code: 532/5
Organization	Represented (if any	/):	
X	I wish to speak.	/NoTHING TO	SAY RYHT NOW"
	I do not wish to s	peak.	

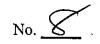
REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: LINDA L. Z. WKE	
Address: 2213 S.18TH Ch	
City: WillwavkEE	Zip Code: 53 3 15
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	



REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

140284 - Resolution relative to the establishment of the five year, 2015-2019, Consolidated Strategy and Plan for submission to the U. S. Department of Housing and Urban Development.

N

Name: Marina Jorg	<u>es</u>
Address: 945.	St
City: MIWaUKOQ	Zip Code: 53204
Organization Represented (if any):	S. O. C.
I wish to speak.	
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

140284 - Resolution relative to the establishment of the five year, 2015-2019,

Consolidated Strategy and Plan for submission to the U. S. Department of Housing and Urban Development.

Name Address: 7/3 5 2/5 Zip Code: 53204

Organization Represented (if any): 50 C

I wish to speak.

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	D,	mother & amarica
Address:		5 Jon W. Highland and
City:	[[]	Zip Code: 5325
Organiza	tiøn I	Represented (if any): Shurk
	<u>/</u>	I wish to speak.
		I do not wish to speak.

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	Jaime H	(voracle	
Address:	939 W	breenfield Are	
City:	Mila	Zip Code: 53204	
Organizatio	on Represented (if any):	Man Archit Courter - Att	g Garage
1	I wish to speak.		
	I do not wish to spea	ak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. usko Community Center, Room

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: 5	La F	Teet			
Address: Z	177 N	1. Oakland	AN	ట	·
City: M./s	-e.ker	WI	Zip	Code: 537	- //
Organization	Represented	(if any): M./w	- Kee	Charla	Center
	I wish to sp	oeak.			
	I do not wi	sh to speak.			

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Dercick Holloway	ether los
Address: 2614 ~ 24th place	
City: Milwauker	Zip Code: 53306
Organization Represented (if any):	•
I wish to speak.	
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

^ f	
Name: Bran Peters	
Address: 540 5 /5+ 5+	
City: Milwalese	Zip Code: 53 204
Organization Represented (if any):	/
I wish to speak.	•
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: telista cullo	
Address: 6745 North 5673 ST	
City: MILWANDE	Zip Code: 5 3 2 2 2 2
Organization Represented (if any):	DAILY SAZT
I wish to speak.	
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: 3	arb Kveny	
Address: 27	45 N. Dr. MLKJ	r. Dine
City: M: (m	mhee	Zip Code: 53212
Organization	Represented (if any):	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
<u>~</u>	I wish to speak.	
	I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	Nichole Vunk	
Address:	1983 N. Su	unnit Are. +24
City:	Milwall M	Zip Code: 532024
Organiza		Wisconsin Community
ike o	I wish to speak.	Services
	I do not wish to spea	ak.



REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Lamont Davis	
Address: 1933 N 34th St.	
City: Milwarkee	Zip Code: <u>5370</u> 名
Organization Represented (if any):	-
I wish to speak.	
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: DAVID JAWIS	
Address: 1903 50 19 6 Pt	
City: MiCa	_ Zip Code: 53204
Organization Represented (if any):	-
I wish to speak.	
I do not wish to speak.	



REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. usko Community Center, Room 1

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	EFF	- M	ARTIN	KA		
Address:	722	Ď.	BOOTH	ST.		
City: N	KE,	M		_ Zip Code:_	5	3212
Organization	Represented	d (if any)	: Neich	porhe	्र	Hose
>	_I wish to s	speak.				
	I do not w	vish to sp	oeak.			

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

140284 - Resolution relative to the establishment of the five year, 2015-2019, Consolidated Strategy and Plan for submission to the U.S. Department of Housing and Urban Development.

01

Name: Shaw	Nove	
Address: 4255 N	aleth	
City: Milwall	LEE	Zip Code: 53209
Organization Represen	ted (if any):	
I wish t	o speak.	
I do not	wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

140284 - Resolution relative to the establishment of the five year, 2015-2019, Consolidated Strategy and Plan for submission to the U.S. Department of Housing and Urban Development.

Name: Shannon REED	
Address: 225 W. VINE St.	
City: Milw, WI	Zip Code: <u>53212</u>
Organization Represented (if any): UN; +	WAY & GREATER MILWAKER
I wish to speak.	
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Ko	ageng Xiong			
Address:				
City: Milw	vaukee	_ Zip Code:_	53208	····
Organization	Represented (if any): HAFA	CHmong	American	Friendship
	I wish to speak.			Association)
	I do not wish to speak			

REGISTRATIONFORM

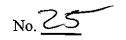
Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	att Welendes
Address:	940 W. Lisbon Aug
City:	lituaille zip Code: 53208
Organization 1	epresented (if any): United Methodist
$\langle \rangle$	I wish to speak. Unildrens Services
	I do not wish to speak.



REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: 3	anbaro	M'	Killor	<u> </u>
Address: 3	4765.	Kunc	bas T	AV
City: M	Wanke	<i>p</i>	Zip Code:_	6320
Organization	Represented (if any)	1: 506		
\overline{X}	I wish to speak.			
	I do not wish to sp	oeak.		

REGISTRATION FORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name:	COTT	SLASKI		
Address:	2200 /	1 5 13	5 PL	
City: /Y	ILWAU	KEE	Zip Code;	53215
Organization	Represented (i	f any):		
平	I wish to spe	eak.		
	I do not wisl	n to speak.		

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Chau	lotte John-Gomez	
Address: /5	9A N. GOTH Street	
City: Mil	warbree	Zip Code: 5 223
Organization l	Represented (if any): <u>LBWN</u>	
X	I wish to speak.	
***************************************	I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: OMGAMDON	··········			
Address: 7506 Warbee AVE				
City: WAV WATOSA		Zip Code:_	53	213
Organization Represented (if any): _	SOCIAL	DEVELOPME	aut	COMMISSION
I wish to speak.				
I do not wish to speak				

No.	
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REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Mayra	Mon ge	
Address: 3715	5.31	
City: Milwau	icei	Zip Code: 53215
Organization Repre	esented (if any):	_
I wi		
I do	not wish to speak.	

No.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: /Se	en Grantine		
Address: 35	7 N. SOE SE	reaf	
City: Miln	vankee	Zip Code:	3598
Organization Rep	presented (if any):	enth St	CHC
<u>X</u> 1	wish to speak.		
I (do not wish to speak.		

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Kebecca (Iru	<i>25</i>
Address: 1570 W Green	rfield Ave
City: Miliaucle	Zip Code: 53204
Organization Represented (if any): \(\)	· · · · · · · · · · · · · · · · · · ·
I wish to speak.	
I do not wish to speak.	

No.	

REGISTRATION FORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: 5	ephania Harling	
Address:		
City:		Zip Code:
Organization 1	Represented (if any): Havenus	200
_	I wish to speak.	
	I do not wish to speak.	

No.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: John long Va	
Address: 3053 N Humbold+	Blad
n 4 1	Zip Code: <u>5 3 2/2</u>
Organization Represented (if any):	
I wish to speak.	
I do not wish to speak.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M. Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: Maria Monge	
Address: 3215, 5.31.5+	
City: Milwaukee	_ Zip Code: <u>537/5</u>
Organization Represented (if any): 50	
I wish to speak.	
\(\) I do not wish to speak	

No.	

REGISTRATIONFORM

Special Public Hearing

Thursday, July 10, 2014 6:00-8:00 P.M.

Kosciusko Community Center, Room 108 2201 S. 7th St., Milwaukee, WI 53215.

Regarding file: 140285 Resolution relative to the establishment of the Year 2015 Funding Allocation Plan.

Name: JOHN E	BERHARDT
Address: 2240	5. 6TH ST-
City: MiLwank	Zip Code: 53215
Organization Represent	ed (if any):
I wish to	wers or CALL IN.
	WEB OR CALL IN,
I do not	wish to speak.