

No. _____

**OFFICE OF THE CITY CLERK
CITY OF MILWAUKEE**

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.**

**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: Teresa Almendarez

Address: 2334 W. Burnham

City: Milwaukee Zip Code: 53204

Organization Represented (if any): SOC

I wish to speak.

I do not wish to speak.

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Housing and Urban Development.**

Name: Martha Ruiz

Address: 2062 South 7th St

City: Milwaukee WI Zip Code: 53204

Organization Represented (if any): SOC

I wish to speak.

I do not wish to speak.

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Housing and Urban Development.**

Name: DIANE KOSARZYCKI

Address: 3373 S 18 ST

City: MKE Zip Code: 53215

Organization Represented (if any): SAFE &

I wish to speak.

SOUND

I do not wish to speak.

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Name: Rebecca Schulz

Address: 325 W. Walnut St

City: Milwaukee Zip Code: 53212

Organization Represented (if any): First Stage

I wish to speak.

I do not wish to speak.

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Name: Jose Robelo

Address: 1211-S-19.

City: Milwaukee WI Zip Code: 53204

Organization Represented (if any): SOC

I wish to speak.

I do not wish to speak.

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Name: Tom Belke

Address: 1028 S 9th St

City: Milwaukee Zip Code: 53204

Organization Represented (if any): The United Community Center (UCC)

I wish to speak.

I do not wish to speak.

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Name: Olivia Pina

Address: 1221 S. 31st

City: Milwaukee Zip Code: 53215

Organization Represented (if any): SOC

I wish to speak.

I do not wish to speak.

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Name: Cendi° martin

Address: 1558 S 23rd st

City: MILWAUKEE. WI Zip Code: 53204

Organization Represented (if any): SOC

I wish to speak.

I do not wish to speak.

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Housing and Urban Development.**

Name: Juana Gutierrez

Address: 1780 S. Muskego Ave

City: Milwaukee WI Zip Code: 53204

Organization Represented (if any): SBC

I wish to speak.

I do not wish to speak.

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Housing and Urban Development.**

Name: Saloman Lugo

Address: 1310 S Cesar Chavez

City: Milwaukee Zip Code: 53209

Organization Represented (if any): La Luz del Mundo Family Services

I wish to speak.

I do not wish to speak.

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Housing and Urban Development.**

Name: Denis Ramos

Address: 2045 A S. 14 st

City: Milwaukee Zip Code: 53204

Organization Represented (if any): La Luz del Mundo Family Service

I wish to speak.

I do not wish to speak.

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Name: Dr. Andrew Calhoun

Address: 3869 W. Port Washington Rd

City: Milwaukee, WI Zip Code: 53212

Organization Represented (if any): Grace Fellowship Church

I wish to speak.

I do not wish to speak.

*Pastors United
5 Points Neighborhood Association
Williamsburg Heights Club
Crown Heights School Club*

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Name: CLAUDIA BREWER

Address: 335 W WRIGHT STREET

City: MILWAUKEE Zip Code: 53212

Organization Represented (if any): WEST CARE WISCONSIN
Harambee Community
Involvement Center

I wish to speak.

I do not wish to speak.

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Name: Elizabeth Garcia

Address: 2419 W. Becker

City: Milwaukee WI Zip Code: 53215

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.

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Name: Talibah Mateen

Address: 801 W. Michigan St

City: Milw Zip Code: 53233

Organization Represented (if any): Safe & Sound

I wish to speak.

I do not wish to speak.

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Name: Cacy Kemp

Address: 2742 N Avondale Blvd

City: Milwaukee Zip Code: 53210

Organization Represented (if any): Safe & Sound Community Prosecution Unit

I wish to speak.

I do not wish to speak.

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Name: Leonel Ortiz

Address: 707 S 23

City: Milwaukee Zip Code: 53209

Organization Represented (if any): La Luz del Mundo Family Services

I wish to speak.

I do not wish to speak.

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Name: Fatima Benhaddou

Address: 2555 N. Powell Ave.

City: Milwaukee Zip Code: 53211

Organization Represented (if any): DOMINICAN CENTER FOR WOMEN

I wish to speak.

I do not wish to speak.

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Name: Pedro Aguilar

Address: 3239 S 10TH ST

City: Milwaukee Zip Code: WI

Organization Represented (if any): SOC

I wish to speak.

I do not wish to speak.