

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

REGISTRATION FORM

JOINT PUBLIC HEARING

October 7, 2019 at 6:30 P.M.

Council Chambers, 3rd Floor, City Hall

RE: The Public Hearing on the Mayor's Proposed 2020 Executive Budget.

PLEASE PRINT

Name:

JOHN FAVORABLE MD STEVE HARGANSEN
MD

Address:

9200 W. Wisconsin Ave

City:

Milwaukee

ZIP CODE:

53226

Organization Represented (if any):

Fredrick Medical

I wish to speak.

College of Wisconsin

I do not wish to speak.

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RE: The Public Hearing on the Mayor's Proposed 2020 Executive Budget.

PLEASE PRINT

Name: Darnell P. Williams

Address: 2402 N 11th St

City: Milwaukee ZIP CODE: 53206

Organization Represented (if any): Spencer

I wish to speak.

I do not wish to speak.

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Name:

Elijah Johnson

Address:

5823 n 117th st

City: Milwaukee

ZIP CODE: 53225

Organization Represented (if any): Spencer ~~Group~~ Contracting

I wish to speak.

I do not wish to speak.

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RE: The Public Hearing on the Mayor's Proposed 2020 Executive Budget.

PLEASE PRINT

Name: Lynnex Fleming

Address: 4407 W North Ave

City: Milwaukee ZIP CODE: 53208

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.

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PLEASE PRINT

Name: Jakai Small

Address: 2506 W Appleton Ave #1

City: Milwaukee WI ZIP CODE: 53225

Organization Represented (if any): Spencer

~~I wish to speak.~~

I do not wish to speak.

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Name: JAMES MACON

Address: 725 W. 26

City: MILWAUKEE ZIP CODE: 53227

Organization Represented (if any): ATU 598

I wish to speak.

I do not wish to speak.

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Name: Annie Travis

Address: 2501 N. 37TH Street

City: Milwaukee ZIP CODE: 53210

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.

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Name:

Dorothy Cottrell

Address:

5031 N. 6th St

City:

MILWAUKEE, WI ZIP CODE: 53218

Organization Represented (if any):

Metcalfe Park
Neighborhood Bridges
Assoc

I wish to speak.

I do not wish to speak.

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Name:

Annie Waaker

Address:

326 S. Grand

City: Milwaukee

ZIP CODE: 53211

Organization Represented (if any):

AFSCME

I wish to speak.

I do not wish to speak.

[Handwritten mark]

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Name: Dennis Grzesinski

Address: 3025 N Farwell Ave

City: Milwaukee

ZIP CODE: 53211

Organization Represented (if any): _____

- I wish to speak.
- I do not wish to speak.

I favor amending the budget to include \$240,000 for a public-private partnership to enable the Health Department to provide Lead Safety kits to new mothers when they deliver.

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Name: Alicia Pilarski

Address: 6000 N. Shore Drive

City: Milwaukee ZIP CODE: 53217

Organization Represented (if any): MCW/Froedter+ / 414Life

I wish to speak.

I do not wish to speak.

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Name: Sally Callan

Address: 5417 N Green Bay

City: Milwaukee ZIP CODE: 53209

Organization Represented (if any): COLE

I wish to speak.

I do not wish to speak.

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Name:

Pamela Richard

Address:

5422 W. Wells St.

City: Milwaukee WI

ZIP CODE: 53208

Organization Represented (if any): Peace Action WI

I wish to speak.

I do not wish to speak.

Please increase spending on community programs,
less spending on police (fire) budget

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Name: Bobbie Myles

Address: 5279 N. SHERMAN

City: MILWAUKEE ZIP CODE: 53207

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.

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Name: Kathleen Williams

Address: 3152 S Indiana

City: Milwaukee ZIP CODE: 53207

Organization Represented (if any): 419 LIFE

I wish to speak.

I do not wish to speak.

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Name:

Isiah Holmes

Address:

1217 S Grand St Apt 4 53214

City: West Allis

ZIP CODE: 53214

Organization Represented (if any): Wisconsin Examiner

I wish to speak.

I do not wish to speak.

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Name:

GERALD ROESCH

Address:

6937 N 98TH

City: MILW

ZIP CODE: 53224

Organization Represented (if any): MICAH

I wish to speak.

I do not wish to speak.

WISH TO BACK THE ADDITION
OF LEAD ABATEMENT TO THE
BUDGET.

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Name: Dorothy Malone

Address: 2308 W Center

City: Milwaukee ZIP CODE: 53206

Organization Represented (if any): Amia i

I wish to speak.

I do not wish to speak.

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Name:

 Melissa Robinson

Address:

City: _____

ZIP CODE: _____

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.

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Name:

Daryl Smith

Address:

9631 W. Fountain Ave, Milwaukee

City:

W

ZIP CODE:

53224

NE
53224

Organization Represented (if any):

I wish to speak.

I do not wish to speak.

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Name:

LaVonica Love

Address:

2852 N 18th Street

City: Milwaukee ZIP CODE: _____

Organization Represented (if any): Cole

I wish to speak.

I do not wish to speak.

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Name:

Marian Wasierki

Address:

4225 N. 92nd St

City: Wauwatosa

ZIP CODE: 53222

Organization Represented (if any): COLE - Hephatha Lutheran Church

I wish to speak.

I do not wish to speak.

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Name:

Bro Treadwell Bey

Address:

1329 W Laust

City: Milwaukee

ZIP CODE: 53206

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.

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Name: BROTHER RICEBEL

Address: 3212 N 23

City: Milwaukee ZIP CODE: 53206

Organization Represented (if any): MOORISH SCIENCE TEMPLE OF AMERICA

I wish to speak.

I do not wish to speak.

AMANI UNITED

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Name: T. Catherine Flouyroy

Address: 3515 W. Hadley Terrace - Shephard

City: Milwaukee ZIP CODE: 53218

Organization Represented (if any): _____

- I wish to speak.
- I do not wish to speak.

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Name: Rose Stietz

Address: 3161 N. M.L. King Dr. #4012

City: Milwaukee, WI ZIP CODE: 53212

Organization Represented (if any): Liberate

I wish to speak.

I do not wish to speak.

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Name: megan O'Halloran

Address: 2314 W. Manchester Ave.

City: Milwaukee ZIP CODE: 53221

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.

Standing in solidarity
with AFSCME ? Liberate MFE

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Name: Amy Mizialko

Address: 601 E Ogden #711 Milw

City: _____ ZIP CODE: 53202

Organization Represented (if any): Milwaukee

I wish to speak. Teachers Education Association

I do not wish to speak.

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Name: Pastor Danny Washington

Address: 3550 N 26th St

City: Milwaukee ZIP CODE: 53206

Organization Represented (if any): BLOC - Sylvia Beasley

I wish to speak.
 I do not wish to speak.

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Name: Bria Grant

Address: 5135 W. Keefe

City: _____ ZIP CODE: 53211

Organization Represented (if any): White MICE

~~____~~ I wish to speak.
 I do not wish to speak.

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PLEASE PRINT

Name: Kenneth Murray

Address: 321 N 29th St

City: Milwaukee ZIP CODE: 53208

Organization Represented (if any): _____

I wish to speak.

I do not wish to speak.