

COMMENT FORM



PLEASE PRINT CLEARLY

- SPEAK INTO THE MICROPHONE AND STATE YOUR NAME AND RESIDING CITY
- Limit Comments to **3 MINUTES**.
- Give to the Clerk in Chambers **prior** to the meeting.

Date of Meeting 1/27/14

Item Number From Agenda 3b

NAME: BRIAN ZIETLOW

ADDRESS: Street: 12111 HAZELDELL AVE

City, State, Zip: OREGON City, OR 97045

PHONE NUMBER: 503 655-4617

E-MAIL ADDRESS: _____

SIGNATURE: Brian Zietlow

COMMENT FORM



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Date of Meeting January 27, 2014

Item Number From Agenda 3b

NAME: James Elting

ADDRESS: Street: 19531 S. Central Point Rd.

City, State, Zip: Oregon City OR 97045

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

SIGNATURE: _____

COMMENT FORM



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Date of Meeting

Jan 27, 2014

Item Number From Agenda

3b

NAME:

Bruce Coe

ADDRESS:

Street:

11847 Payson Lane

City, State, Zip:

Oregon City

PHONE NUMBER:

E-MAIL ADDRESS:

SIGNATURE:

OR 97045
503-720-8187

COMMENT FORM



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Date of Meeting 1-27-14

Item Number From Agenda 3b

NAME: Jim Kelly

ADDRESS: Street: 11751 Hazelhurst Ave

City, State, Zip: Oregon city Or.

PHONE NUMBER: 503-655-1800

E-MAIL ADDRESS: _____

SIGNATURE: [Handwritten Signature]

COMMENT FORM



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Date of Meeting

1/27/14

Item Number From Agenda

3b

NAME:

Warren Carlson

ADDRESS:

Street: 19532 S Central PT Rd.

City, State, Zip: Oregon City OR 97045

PHONE NUMBER:

503 650 0501

E-MAIL ADDRESS:

wccarlson1@comcast.net

SIGNATURE:

Warren Carlson

COMMENT FORM



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Date of Meeting 1/27/2014

Item Number From Agenda ZC 13-03

NAME: TODD MOBLEY

ADDRESS: Street: 321 SW 4TH AVENUE, SUITE 400

City, State, Zip: PORTLAND, OR 97204

PHONE NUMBER: (503) 248-0313

E-MAIL ADDRESS: TODD@WINCHESTERENGINEERING.COM

SIGNATURE: 

COMMENT FORM



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Date of Meeting

1/27/14

Item Number From Agenda

3b

NAME:

Mimi Doukas - Applicant

ADDRESS:

Street: 4230 Colewood St

City, State, Zip: Lake Oswego OR 97035

PHONE NUMBER:

503-387-7600

E-MAIL ADDRESS:

Mimi@ventureprop.com

SIGNATURE:

Mimi Doukas

COMMENT FORM



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Date of Meeting Jan 27, 2014

Item Number From Agenda 2C 13-03

NAME: Jordan Burch

ADDRESS: Street: 12060 Hazeldell Ave

City, State, Zip: Oregon City, OR 97045
(503) 866-0997

PHONE NUMBER:

E-MAIL ADDRESS: jordanlevitburch@gmail.com

SIGNATURE: [Handwritten Signature]

COMMENT FORM



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Date of Meeting

27 JAN 2014

Item Number From Agenda

36

NAME:

PAT ULLMAN

ADDRESS:

Street:

11830 PAVEN LANE

City, State, Zip:

OREGON CITY OR 97043

PHONE NUMBER:

503-656-2389

E-MAIL ADDRESS:

patullman@msn.com

SIGNATURE:

Pat Ullman

COMMENT FORM



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Date of Meeting 1-27-14

Item Number From Agenda 3 B

NAME: KIRBY WARNER

ADDRESS: Street: 11833 S. WHITE LANE

City, State, Zip: OREGON CITY, OR. 97045

PHONE NUMBER: 503-722-7473

E-MAIL ADDRESS: K&BRWARNER@COMCAST.NET

SIGNATURE: Kirby Warner

COMMENT FORM



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Date of Meeting

1/27/14

Item Number From Agenda

3B

NAME:

Margaret Murphy

ADDRESS:

Street:

19621 Renee Way

City, State, Zip:

OC, OR 97045

PHONE NUMBER:

503-724-1485

E-MAIL ADDRESS:

4444 lpm@comcast.net

SIGNATURE:

Margaret Murphy

COMMENT FORM



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Date of Meeting 1/27/14

Item Number From Agenda 3B

NAME: Kathy Hogan

ADDRESS: Street: 19721 S Central Pk Rd

City, State, Zip: One City, Ore 97045

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

SIGNATURE: _____

COMMENT FORM



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Date of Meeting

1/27/2014

Item Number From Agenda

EC 13-03 (3B)

NAME:

LEOMARSH

ADDRESS:

Street: 12121 HAZELDELL AVE

City, State, Zip: OREGON CITY OR97045

PHONE NUMBER:

503-518-1942

E-MAIL ADDRESS:

dumbokoi@msn.com

SIGNATURE:

Lee Marsh

COMMENT FORM



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Date of Meeting

1-27-14

Item Number From Agenda

3B

NAME:

Tom O'Brien

ADDRESS:

Street: 19364 HAZEL GROVE

City, State, Zip: OR. CITY, 97045

PHONE NUMBER:

503-723-3334

E-MAIL ADDRESS:

SIGNATURE:

Tom O'Brien

COMMENT FORM



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Date of Meeting 1-27-14

Item Number From Agenda 2C 1303

NAME: Miranda Harger

ADDRESS: Street: _____

City, State, Zip: Oregon City

PHONE NUMBER: 916-833-2211

E-MAIL ADDRESS: _____

SIGNATURE: _____

COMMENT FORM



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Date of Meeting 1-27-14

Item Number From Agenda 30

NAME:

David Rustan (Rustan)

ADDRESS:

Street: 19530 SO. CENT ST RD

City, State, Zip: 97045 OR OR

PHONE NUMBER:

503-655-0186

E-MAIL ADDRESS:

SIGNATURE:

[Handwritten Signature]