

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: CLAUDETTE FAULKENBURY DATE: 11.3.2017

ADDRESS: 2016 SHADOW LANE PHONE: 904-687-5472

CITY: NEPTUNE BEACH COUNTY: DUVAL STATE: FL. ZIP: 32266

REPRESENTING: CCDF

SIGNATURE: Claudette Faulkenbury I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I WISH TO SUPPORT THE CITY COUNCIL'S SPECIAL COMMITTEE THAT MAINTAINS THE CURRENT BALANCE. ALSO DESIRE FOR ALL DISTRICTS

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER. *INCLUDING SAN MATEO TO BE*
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.

(PLEASE READ THE REVERSE SIDE FOR INSTRUCTIONS ON SPEAKING BEFORE THE CITY COUNCIL.)

SINCE IT IS THEIR DISTRICTS REPRESENTED THAT ARE IMPACTED BY THIS RULING.

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*Name & Address are required

NAME: Kian Pryor DATE: 11-3-22

ADDRESS: 245 W 5th St PHONE: 904-445-1555

CITY: Jax COUNTY: Duval STATE: FL ZIP: 32206

REPRESENTING: _____

SIGNATURE: Kian Pryor I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: 2022 Redistricting

**SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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*Name & Address are required

NAME: Marcela Winnand DATE: 11-3-22

ADDRESS: 1303 S. McDuff Ave PHONE: 901-465-4328

CITY: Jax COUNTY: David STATE: FL ZIP: 32208

REPRESENTING: myself

SIGNATURE: [Handwritten Signature] I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Keep in our election
fair - keep current
redistricting

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*Name & Address are required

NAME: Vanessa Cullins-Dupkin DATE: 11-3-22

ADDRESS: 3283 Edgewood Ave. W. PHONE: 904-859-4959

CITY: Jax COUNTY: Duval STATE: FL ZIP: 32209

REPRESENTING: Self

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: The Agent. Ft's map
is best for economic development of
Northwest Jax

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*Name & Address are required

NAME: Nancy Powell DATE: 11/3/22

ADDRESS: 1848 Challen PHONE: _____

CITY: Dux COUNTY: _____ STATE: _____ ZIP: 32205

REPRESENTING: self

SIGNATURE: [Signature] I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting

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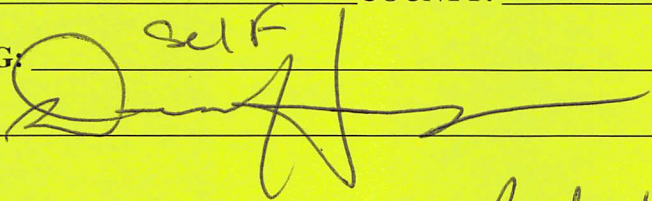
*Name & Address are required

NAME: Daniel Henry DATE: 11/3/22

ADDRESS: 8150 Point Meador Dr, Apt 4/4 PHONE: 904-708-0748

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32256

REPRESENTING: self

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: redistricting myself and my disapproval

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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*Name & Address are required

NAME: John W. Faulkenbury DATE: 11/3/2022
ADDRESS: 2016 Shadow Ln PHONE: 904-535-5938
CITY: Neptune Beach COUNTY: Duval STATE: FL ZIP: 32266
REPRESENTING: CCDF
SIGNATURE: John W. Faulkenbury I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I wish for SAN MATEO AND
OTHER IMPACTED DISTRICTS THAT ARE AFFECTED BY
THIS RULING, TO BE REPRESENTED & ALLOWED TO PARTICIPATE

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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PATK
THIS
DECISION

(PLEASE READ THE REVERSE SIDE FOR INSTRUCTIONS ON SPEAKING BEFORE THE CITY COUNCIL.)

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*Name & Address are required

NAME: Charletta Sowell DATE: 11-3-22

ADDRESS: 12353 Benton Harbor Dr. PHONE: 868-6199

CITY: ga COUNTY: Duval STATE: FL ZIP: 32225

REPRESENTING: NCOS

SIGNATURE: Charletta Sowell I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I am hoping that there will be a fair + equitable decision on these maps that will not keep black voters from choosing leaders

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*Name & Address are required

NAME: JoAnn Brooks DATE: 11/3/2022

ADDRESS: 2052 Huntington Cir W PHONE: 904-608-4540

CITY: JAX COUNTY: Duval STATE: FL ZIP: 32246

REPRESENTING: NCOJ

SIGNATURE: JoAnn M. Brooks I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting - include
TAXPAYERS AND VOTERS in the Decisions

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*Name & Address are required

NAME: Melissa Refrus DATE: 11-3-2022

ADDRESS: 14030 Atlantic Blvd Unit 1837 PHONE: _____

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32225

REPRESENTING: myself

SIGNATURE: Melissa Refrus I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I oppose putting the San Mateo community into District 7 or District 8.

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*Name & Address are required

NAME: Melissa Bernhard DATE: 1-3-22

ADDRESS: 0820 Ramoth Dr PHONE: 904-382-7296

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32226

REPRESENTING: _____

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: San Matea

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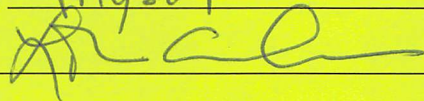
*Name & Address are required

NAME: Lori Crunden DATE: 11/3/2022

ADDRESS: 242 San Pablo Rd. N. PHONE: (904)237-1067

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32225

REPRESENTING: myself

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I oppose putting the San Mateo community into District 7 or 8. Would like to see

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*Name & Address are required

NAME: Sallie M. Barnes DATE: 11-3-22

ADDRESS: 2363 Common Wealth Ave. PHONE: 904-388-0610

CITY: Jacksonville COUNTY: Deval STATE: FL ZIP: 32209

REPRESENTING: Self

SIGNATURE: Sallie M. Barnes I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting

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*Name & Address are required

NAME: Sharri Godard DATE: 11.3.22

ADDRESS: 541 Oleander Street PHONE: _____

CITY: N.B. COUNTY: Duval STATE: FL ZIP: 32266

REPRESENTING: _____

SIGNATURE: Sharri Godard I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I oppose putting the San Mateo Community into district 7 or district 8.

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*Name & Address are required

NAME: Kathleen Murray DATE: 3 NOV 22

ADDRESS: 11674 Gran Crique Ct N PHONE: 757-438-6790

CITY: JAX COUNTY: DUVAL STATE: FL ZIP: 32223

REPRESENTING: CCDF DUVAL

SIGNATURE: Mary K. Murray I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting

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*Name & Address are required

NAME: Essay M. Howard DATE: 11-3-22

ADDRESS: 1130 Bluehill Dr. N PHONE: 904-885-7306

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32218

REPRESENTING: NCOJ

SIGNATURE: Essay M. Howard I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: General

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*Name & Address are required

NAME: Michele Matisoo DATE: 11/03/2022
ADDRESS: 139 37th Ave PHONE: (757) 839-3905
CITY: Jax Beach COUNTY: Duval STATE: FL ZIP: 32250
REPRESENTING: CITIZEN who love our country AND WANT THE
GAMES TO STOP
SIGNATURE: ~~San - matisoo~~ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: America

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*Name & Address are required

NAME: Mike Gay DATE: 11-3-22

ADDRESS: 12000 Abess Blvd 6106 PHONE: 904 613 6568

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32225

REPRESENTING: Self

SIGNATURE: Mike Gay I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting

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*Name & Address are required

NAME: Joanna Lumb DATE: 11/3/22

ADDRESS: 2164 Gilmore St. PHONE: (904) 708-9474

CITY: Jax COUNTY: Duval STATE: FL ZIP: 32204

REPRESENTING: self

SIGNATURE: Joanna Lumb I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting

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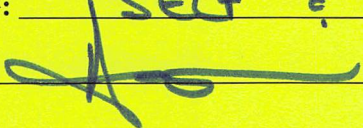
*Name & Address are required

NAME: ANNIE GLYNN DATE: 11/3/22

ADDRESS: 2145 College Street PHONE: 910 443 9064

CITY: JACKSONVILLE COUNTY: DUVAL STATE: FL ZIP: 32204

REPRESENTING: SELF & SAN MATEO RESIDENTS

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: REDISTRICTING

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*Name & Address are required

NAME: Brandi Mathews DATE: 11/03/2022

ADDRESS: 3757 Randall St. PHONE: 904-708-2201

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32205

REPRESENTING: Memorial Park Association

SIGNATURE: Brandi Mathews I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting
keeping Riverside / Avondale intact

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*Name & Address are required

NAME: Carrill Oliver DATE: 11-3-22

ADDRESS: 611 E Adam St PHONE: _____

CITY: Jax COUNTY: Duval STATE: FL ZIP: 32208

REPRESENTING: _____

SIGNATURE: C. Carrill I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: _____

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*Name & Address are required

NAME: Maleana Gay DATE: 11-3-22

ADDRESS: 1113 Cedar Bay Rd PHONE: 904 207 1988

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32218

REPRESENTING: _____

SIGNATURE: Maleana B. Gay I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Concerns for constituents
residing in Dist 2

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*Name & Address are required

NAME: George brigman DATE: 11/13/2022
ADDRESS: 9760 Beauclerc fern PHONE: 904 591-6033
CITY: Jacksonville COUNTY: DUVAL STATE: FL ZIP: 32257
REPRESENTING: concerned citizens of DUVAL county
SIGNATURE: George Brigman I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Support the MAROON MAP
> Require full council for any vote - not just select few

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*Name & Address are required

NAME: Wanda Brigman DATE: 11/3/2023

ADDRESS: 9760 Bendler Terr PHONE: 904.733.2436

CITY: JAX COUNTY: Duval STATE: FL ZIP: 32257

REPRESENTING: Myself

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Support the Maroon Map!
Keep Argle Forest in District 14
Thank you!

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*Name & Address are required

NAME: Wayne Wood DATE: 11/3/22

ADDRESS: 2821 Riverside Ave PHONE: _____

CITY: Jax COUNTY: _____ STATE: _____ ZIP: 32205

REPRESENTING: Redistricting

SIGNATURE: Wayne Wood I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting

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*Name & Address are required

NAME: BEN FROZIER DATE: _____

ADDRESS: 9646 Waverly PHONE: 504 662 2740

CITY: JA COUNTY: FL STATE: _____ ZIP: 32720

REPRESENTING: Northside Coalition -

SIGNATURE: _____ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Registering

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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*Name & Address are required

NAME: Lanella Ph. Ilman DATE: 11-3-2022

ADDRESS: 10377 Sequoia Drive PHONE: 904-732-9351

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32257

REPRESENTING: 

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Red. stricting VAA

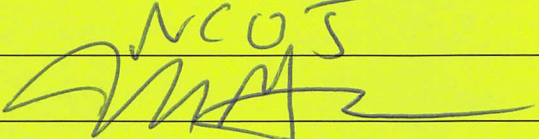
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*Name & Address are required

NAME: Mike Ludwick DATE: 11/3/22
ADDRESS: 13490 Bran Bay Pkwy Apt 212 PHONE: 904-674-6906
CITY: Jax COUNTY: Duval STATE: FL ZIP: 32258
REPRESENTING: NCOS
SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Support the Plaintiffs
Map

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*Name & Address are required

NAME: Pamela Henry DATE: 11-3-22

ADDRESS: PO Box 398 PHONE: _____

CITY: GCS FL COUNTY: Clay STATE: _____ ZIP: _____

REPRESENTING: self / citizen

SIGNATURE: Pamela Henry I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I am against accepting a new map for redistricting.

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*Name & Address are required

NAME: Tyra Smude DATE: 11-3-22

ADDRESS: 1309 Avondale Ave PHONE: 786-566 8532

CITY: Jax COUNTY: Duval STATE: FL ZIP: 32205

REPRESENTING: WR

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Plaintiff map should be reconsidered +
the basis for any amendments. Incumbency should NOT
drive the maps. Maps should represent JAX people + community

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*Name & Address are required

NAME: JOE ROSS, SR. DATE: 11/3/2022

ADDRESS: 7361 JOHN F. KENNEDY DR. E PHONE: 904-329-6289

CITY: JAX COUNTY: DUVAL STATE: FL ZIP: 32219

REPRESENTING: NCOJ

SIGNATURE: [Signature] I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting Map

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*Name & Address are required

NAME: Joseph M George DATE: 11/3/2022

ADDRESS: 5557 Paulbert Dr PHONE: 904-22-89761

CITY: Jax COUNTY: Duval STATE: Fl ZIP: 32277

REPRESENTING: _____

SIGNATURE: Joseph M. George I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: I support the city's unity map.

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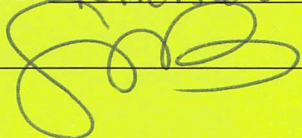
*Name & Address are required

NAME: Shannon Blankinship DATE: 11/3

ADDRESS: 1071 Talbot Ave PHONE: _____

CITY: Jax COUNTY: _____ STATE: _____ ZIP: _____

REPRESENTING: Riverside Avondale Preservation

SIGNATURE:  _____ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: _____
Please Retain R-A in one district

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*Name & Address are required

NAME: PATRY REYNOLDS DATE: 11/3/22

ADDRESS: 1525 ACONDAEE AVE PHONE: 708 337 0312

CITY: Jkt COUNTY: DOYAL STATE: FL ZIP: 32205

REPRESENTING: RIVERSIDE ACONDAEE PRESERVATION

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: _____

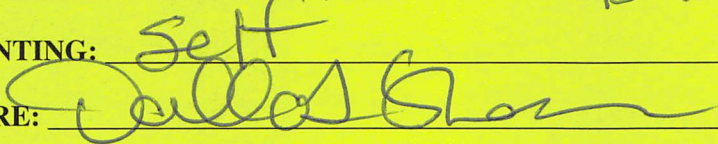
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*Name & Address are required

NAME: Dallas Sheeran DATE: 11/3/22
ADDRESS: 3311 Isabella Blvd. PHONE: 949.690.8383
CITY: JAX Beach COUNTY: Duval STATE: FL ZIP: 32250
REPRESENTING: Self
SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: We should accept the^{redistricting} proposal offered by the City Council Special Committee.

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*Name & Address are required

NAME: Angela Schifanella DATE: 11.3.22

ADDRESS: 1352 Avondale Av PHONE: 904.860.7965

CITY: Jaf COUNTY: Duval STATE: FL ZIP: 32205

REPRESENTING: self / RAP

SIGNATURE: _____ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting

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*Name & Address are required

NAME: Ramona S. Rood DATE: 11-3-2022

ADDRESS: 4022 Moresburg Ct PHONE: 904-742 8007

CITY: JACKSONVILLE COUNTY: DUVAL STATE: FL ZIP: 32257

REPRESENTING: _____

SIGNATURE: Ramona S R I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting "2"

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.

(PLEASE READ THE REVERSE SIDE FOR INSTRUCTIONS ON SPEAKING BEFORE THE CITY COUNCIL.)

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: John Draper DATE: 11/3/22

ADDRESS: 8250 Weybridge Dr PHONE: 472-1195

CITY: Jax COUNTY: _____ STATE: _____ ZIP: 32244

REPRESENTING: Self

SIGNATURE: John Draper I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: 2022-0800

**SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.**

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PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Jeremiah S P Johnson DATE: 11/3/22

ADDRESS: 1113 Harrison St. PHONE: 904 253 9303

CITY: Oax. COUNTY: Duval STATE: FL ZIP: 32802

REPRESENTING: Self & Charles Barr & Mike Barr

SIGNATURE: Jeremiah S P Johnson I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting maps / vote of the ppl.

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PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

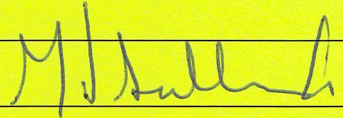
*Name & Address are required

NAME: GERARD SULLIVAN DATE: 11/3/22

ADDRESS: 1023 RIVER OAKS RD PHONE: 904-716-1950

CITY: JACKSONVILLE COUNTY: DUVAL STATE: FL ZIP: 32207

REPRESENTING: _____

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: LIME PLAN VIOLATES COURT ORDER
BY SORTING VOTERS BY RACE / DIVIDING UP HISTORICALLY
COHESIVE RIVERSIDE / AVONDALE NEIGHBORHOOD. MAXIMUM IN PREFERABLE

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Charles Barr DATE: 11-3-22

ADDRESS: 819 Fields Rd PHONE: _____

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32218

REPRESENTING: Self / Mike Gay / Dist 7 citizens

SIGNATURE: Charles Barr I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting issue

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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OUR CHARTER IS GONNA BE REMOVED 2014-769 Tom CHINE
PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

2022-0188-IG. INVISIBLE 2015-765
Guy

PLEASE PRINT *Name & Address are required

NAME: John J. Noonan DATE: 11/3/2022

ADDRESS: 8356 BASCOM RD. PHONE: 904-434-0839

CITY: JACKSONVILLE COUNTY: DUVAL STATE: FL. ZIP: 32216

REPRESENTING: DOT. FOR AG, CRC,

SIGNATURE: John J. Noonan I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: 2017-160 Public Participation
HAS BEEN REMOVED FROM THE JACKSONVILLE CITY COUNCIL
LEGISLATIVE COMMITTEE PROCESS.

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REDISTRICTING.

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Cavelle Roman DATE: 11/3/22

ADDRESS: 11990-1 Old Kings PHONE: 351-8118

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32219

REPRESENTING: We the ~~People~~ People

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Redistricting COJ. Why the big rush. Keep as is so we can have time between now and next election cycle to do it right! Redistrict so all districts are equally divided

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while also keeping the neighborhoods intact. This will take and requires a lot of time and effort beyond the deadline on the table today.

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Mickey Roman DATE: 11-3-22

ADDRESS: 11990 Old Kings Rd PHONE: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: 32219

REPRESENTING: was the Populist

SIGNATURE:  _____

I DO NOT WISH TO SPEAK

(From online)

COMMENTS FROM THE PUBLIC SUBJECT: new Controversies - THIS
IS HAPPENING TO FAST. Multiple Candidates
Have invested time, energy + \$ TO FIND DISTRICTS

SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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Roman

(PLEASE READ THE REVERSE SIDE FOR INSTRUCTIONS ON SPEAKING BEFORE THE CITY COUNCIL.)

LEAVE MAP IN PLACE THE NEXT CYCLE
CAN'T FIND MAP ON COB, COM?

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Eunice Barnun DATE: _____

ADDRESS: 9121 Spottswood Rd PHONE: _____

CITY: Gax COUNTY: Deval STATE: 71 ZIP: 32208

REPRESENTING: _____

SIGNATURE: Eunice Barnun I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: _____

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