DOCKET ITEM NO.

R

<u>PLEASE COMPLETE THIS FORM AND GIVE IT TO THE CITY CLERK</u> BEFORE YOU SPEAK ON A DOCKET ITEM
PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.
1. NAME:JIM Butley
2. ADDRESS: 406 Skyhill Road
TELEPHONE NO. $7D337D-3334$ e-mail address:
3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF?
BFAAC rep
4. WHAT IS YOUR POSITION ON THE ITEM? FOR: AGAINST: OTHER:

5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.):

6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? YES NO

This form shall be kept as a part of the permanent record in those instances where financial interest or compensation is indicated by the speaker.

A maximum of three minutes will be allowed for your presentation, except that one officer or other designated member speaking on behalf of each *bona fide* neighborhood civic association or unit owners' association desiring to be heard on a docket item shall be allowed five minutes. In order to obtain five minutes, you must identify yourself as a designated speaker, and identify the neighborhood civic association or unit owners' association you represent, at the start of your presentation. If you have a prepared statement, please leave a copy with the Clerk.

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Guidelines for the Public Discussion Period

(a) All speaker request forms for the public discussion period must be submitted by the time the item is called by the city clerk.

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(c) If more speakers are signed up than would be allotted for in 30 minutes, the mayor will organize speaker requests by subject or position, and allocated appropriate times, trying to ensure that speakers on unrelated subjects will also be allowed to speak during the 30 minute public discussion period.

(d) If speakers seeking to address council on the same subject cannot agree on a particular order or method that they would like the speakers to be called on, the speakers shall be called in the chronological order of their request forms' submission.

SPEAKER'S FORM	e
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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.	
1. NAME: <u>Gene Kendal</u>	
2. ADDRESS: 209 E. Lukay averue	-
3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF?	-
Board President, Alex Neighborhood Health San	cos la
TELEPHONE NO.	+SI
5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.):	
	_

6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? YES _____ NO _____

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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.		
I. NAME: Mr. DSON MIDDUGH		
2. ADDRESS: 2702 King Street		
TELEPHONE NO. $\frac{7}{323}$ $\frac{3750}{516}$ e-mail address:		
3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? NOVO BOOLD		
4. WHAT IS YOUR POSITION ON THE ITEM? FOR: AGAINST: OTHER:		

- 5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.):
- 6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? YES ______ NO _____

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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.
I. NAME: TING tontaine
2 ADDRESS: 5249 Duke Street, #308
TELEPHONE NO. $7)212-1711$ e-Mail address:
3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? Healthy Families
4. WHAT IS YOUR POSITION ON THE ITEM?
FOR: AGAINST: OTHER:
5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.):

6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? YES ______ NO _____

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(e) Any speakers not called during the public discussion period will have the option to speak at the conclusion of the meeting, after all docketed items have been heard.

4

DOCKET ITEM NO. 8 <u>PLEASE COMPLETE THIS FORM AND GIVE IT TO THE CITY CLERK</u> <u>BEFORE YOU SPEAK ON A DOCKET ITEM</u>.

PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.

- 1. NAME: John Stephenson
- ADDRESS: 133 North Payne Street, Apt. 1
 TELEPHONE NO. 267 446-3270 E-MAIL: stephenj05@gmail.com
- 3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? Alexandria Taxpayers United
- 4. WHAT IS YOUR POSITION ON THE ITEM? Other Recommendations for budget
- 5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.): Resident
- 6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? No

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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.
1. NAME: Daniel Sweeny
2 ADDRESS: 22 E. Oak St
TELEPHONE NO. 703 6835165 E-MAIL ADDRESS:
3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? Friends of the
Alex: mental Health ctr.
4. WHAT IS YOUR POSITION ON THE ITEM? FOR: AGAINST: OTHER:
5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.):

6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? YES ______ NO ______

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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.

- 1. NAME: Annie Hallman
- ADDRESS: 317 8th St. NE, Washington, DC 20002
 TELEPHONE NO. E-MAIL: Inicholson@higherachievement.org
- 3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? Higher Achievement
- 4. WHAT IS YOUR POSITION ON THE ITEM? Other Support for Higher Achievemnet City Funding
- 5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.): Civic Interest
- 6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? No

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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.

- 1. NAME: Kafi Joseph
- 2. ADDRESS: 317 8th St. NE, Washington, DC 20002 TELEPHONE NO. E-MAIL: Inicholson@higherachievement.org
- 3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? Higher Achievement
- 4. WHAT IS YOUR POSITION ON THE ITEM? Other Support for Higher Achievement City Funding
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- 1. NAME: Amelia Crowi
- ADDRESS: 317 8th St. NE, Washington, DC 20002
 TELEPHONE NO. E-MAIL: Inicholson@higherachievement.org
- 3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? Higher Achievement
- 4. WHAT IS YOUR POSITION ON THE ITEM? Other Support for Higher Achievement City Funding
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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.

- 1. NAME: Gilda Hagan-Brown
- ADDRESS: 317 8th St. NE Washington, DC 20002 TELEPHONE NO. E-MAIL: Inicholson@higherachievement.org
 WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? Higher Achievement
- 4. WHAT IS YOUR POSITION ON THE ITEM? Other Support for Higher Achievement City Funding
- 5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.): Civic Interest
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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.
I NAME: Catherine Clincer
2 ADDRESS: 206 W. Mrgtle Street
TELEPHONE NO. 703 548-867&-MAIL ADDRESS:
3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF?
TC Williams PTSA
4. WHAT IS YOUR POSITION ON THE ITEM? FOR: AGAINST: OTHER:
5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.):

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13

DOCKET ITEM NO 🙎
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PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING. 1. NAME: Patty Willers 2. ADDRESS: 915 N. Van Dorn St. Apt. 202, Alexandria, VA 22304 TELEPHONE NO. 703/370-5311 E-MAIL ADDRESS: patty 51 Willers@ 901. com 3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF? No one
4. WHAT IS YOUR POSITION ON THE ITEM? FOR: AGAINST: OTHER:
5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.): The Florg Casey Heg H. Center 6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? YES NO

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The public normally may speak on docket items only at public hearing meetings, and not at regular legislative meetings. Public hearing meetings are usually held on the Saturday following the second Tuesday in each month; regular legislative meetings on the second and fourth Tuesdays in each month. The rule with respect to when a person may speak to a docket item at a legislative meeting can be waived by a majority vote of council members present but such a waiver is not normal practice. When a speaker is recognized, the rules of procedures for speakers at public hearing meetings shall apply. If an item is docketed *for public hearing* at a regular legislative meeting, the public may speak to that item, and the rules of procedures for speakers at public hearing meetings shall apply.

In addition, the public may speak on matters which are not on the docket during the Public Discussion Period at public hearing meetings. The mayor may grant permission to a person, who is unable to participate in public discussion at a public hearing meeting for medical, religious, family emergency or other similarly substantial reasons, to speak at a regular legislative meeting. When such permission is granted, the rules of procedures for public discussion at public hearing meetings shall apply.

Guidelines for the Public Discussion Period

(a) All speaker request forms for the public discussion period must be submitted by the time the item is called by the city clerk.

(b) No speaker will be allowed more than three minutes; except that one officer or other designated member speaking on behalf of each *bona fide* neighborhood civic association or unit owners' association desiring to be heard during the public discussion period shall be allowed five minutes. In order to obtain five minutes, you must identify yourself as a designated speaker, and identify the neighborhood civic association or unit owners' association or unit owners' association or unit owners' association.

(c) If more speakers are signed up than would be allotted for in 30 minutes, the mayor will organize speaker requests by subject or position, and allocated appropriate times, trying to ensure that speakers on unrelated subjects will also be allowed to speak during the 30 minute public discussion period.

(d) If speakers seeking to address council on the same subject cannot agree on a particular order or method that they would like the speakers to be called on, the speakers shall be called in the chronological order of their request forms' submission.

docket item no. \mathscr{P}

<u>PLEASE COMPLETE THIS FORM AND GIVE IT TO THE CITY CLERK</u> <u>BEFORE YOU SPEAK ON A DOCKET ITEM</u>

PLEASE ANNOUNCE THE INFORMATION SPECIFIED BELOW PRIOR TO SPEAKING.			
1. NAME: Post letel			
2. ADDRESS: 1217 Michigan cont			
TELEPHONE NO E-MAIL ADDRESS:			
3. WHOM DO YOU REPRESENT, IF OTHER THAN YOURSELF?			
.			
4. WHAT IS YOUR POSITION ON THE ITEM? FOR: AGAINST: OTHER:			
5. NATURE OF YOUR INTEREST IN ITEM (PROPERTY OWNER, ATTORNEY, LOBBYIST, CIVIC INTEREST, ETC.):			

6. ARE YOU RECEIVING COMPENSATION FOR THIS APPEARANCE BEFORE COUNCIL? YES ______ NO ______

This form shall be kept as a part of the permanent record in those instances where financial interest or compensation is indicated by the speaker.

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Stephen A. Haering, MD, MPH Health Director

•	rearen	Director	

RE:	CITIZEN INPUT ON FLORA KRAUSE CASEY HEALTH CENTER
SUBJ:	ITEM #8 – CITIZENS INPUT ON THE PROPOSED FY2012 BUDGET ~ FROM PUBLIC HEARING ON OCTOBER 16, 2010
FROM:	STEPHEN A. HAERING, MD, MPH, DIRECTOR ALEXANDRIA HEALTH DEPARTMENT
то:	THE HONORABLE MAYOR AND MEMBERS OF CITY COUNCIL
DATE:	OCTOBER 29, 2010

At its Public Hearing on October 16, 2010, the Alexandria City Council received input from a concerned City resident addressing Council's continued support for services at the Alexandria Health Department (AHD) Flora Krause Casey Health Center.

The AHD provides primary care services for chronic disease, communicable disease, and to obstetrics patients that are residents of the City. Although the pharmacy services and chronic disease patient levels have recently been reduced in scope due to decreased state funding support, there continues to be a commitment on the part of AHD to maintain and further develop access to care for uninsured residents.

The Health Department reported to Council last March (during Council's FY2011 budget meetings) that there had been on-going discussions to expand services offered by Alexandria Neighborhood Health Services, Inc. (ANHSI) at Casey. These discussions continue and, once firm proposals are in place, a plan will be presented to Council. As you may be aware, approximately 600 patients have been successfully transferred to ANHSI for medical treatment. Although these patients are no longer able to receive prescriptions filled by the AHD pharmacy, their medications are available at local pharmacists for a co-pay of \$5.

If you wish to discuss this item further, or if you wish for me to provide Council with additional information, I can be reached at (703) 746-4956.

KING STREET 4480 King Street Alexandria, VA 22302 (703) 746-4996 CASEY HEALTH CENTER 1200 N. Howard Street Alexandria, VA 22304 (703) 746-4886 **TEEN WELLNESS CENTER** 3330 King Street Alexandria, VA 22302 (703) 746-4776 ARLANDRIA (WIC) 3802 Executive Ave. #D-2 Alexandria, VA 22305 (703) 519-1957

www.alexhealth.com



<u>www.vdh.virginia.gov</u>