

EXHIBIT NO. 1

16
2-14-06

NAME OF COUNCIL MEMBER

CONTESTED APPOINTMENT

ENDORSED BY

ALEXANDRIA SOCIAL SERVICES ADVISORY BOARD
(3-Year Term)
1 Citizen Member

_____ Shavonta Green
(Residency Waiver Required)

_____ Saida Musse

_____ Robert Wavra

TOMC

NAME OF COUNCIL MEMBER

16

2-14-06

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(3-Year Term)
1 Citizen Member

1 Shavonta Green GAUDY
(Residency Waiver Required)

* 4 Saida Musse MITCHELL, KAPICKA, WOODSON, SHAWBERG

2 Robert Wavra EULICE, PEPPER

1 2 3 4 5 6 7

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Macdonald
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AM _____ Saida Musse

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Saida Musse

Robert Wavra

(Handwritten mark)

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Emille
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Krupicka
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Pepper
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S Saida Musse

_____ Robert Wavra
