

PUBLIC COMMENT From: Laurie Winters Agenda Item: C1. Taxpayers' Bill of Rights Hearing Meeting Date: 8/30/22

Taxpayer would like to speak at the hearing: I do not want to speak at the hearing

Type of Tax: Property Tax

Speaker's Name: Laurie Winters

Title (if applicable):

Company (if applicable):

Mailing Address:

City: Santa Monica

State: CA

Zip Code:

E-Mail Address:

Account Number (if applicable):

Taxpayer's Name (if not speaker):

Organization:

Telephone Number:

Description of Issues: I believe Prop 19 will hurt my family and I support repealing it. Thank you!

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