

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: Gerald Cloze

HOME ADDRESS: 217. W. Grady St Blooming Grove, TX

PHONE: 983. 602. 1678

GROUP OR ORGANIZATION REPRESENTED: (If Any) AMR

AGENDA ITEM: (If Any) EMS - Ambulance

(circle one): ~~SUPPORT~~ OPPOSE

ADDITIONAL COMMENT OR CONCERN: Concern about changing EMS to Care Flight.

Signature: 

NOTICE: This Form must be presented to the Court Clerk (or designated Court Assistant) prior to the presiding officer calling the Meeting to order. Failure to timely return this form will prevent you from participating in the Meeting.

Spoke @ 9:28 CB

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: Patrick Norris

HOME ADDRESS: 2116 CR801B Cleburne, TX 76031

PHONE: (469) 773-8408

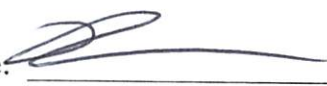
GROUP OR ORGANIZATION REPRESENTED: (If Any) _____

AGENDA ITEM: (If Any) Ambulance Contract to CareFlight

(circle one): SUPPORT OPPOSE

ADDITIONAL COMMENT OR CONCERN:

Concerns about funding, ethics, overuse of dangerous interventions

Signature: 

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Spoke @ 9:31 CB

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: Kevin Kamena

HOME ADDRESS: 856 Roland Dr Fate TX 75189

PHONE: 909-257-4260

GROUP OR ORGANIZATION REPRESENTED: (If Any) AMR Johnson County

AGENDA ITEM: (If Any) RH RFP 2024-303

(circle one): SUPPORT

OPPOSE

ADDITIONAL COMMENT OR CONCERN: Careflight has non-dedicated trucks.

Signature: 

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Spoke @ 9:34 CB

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: Misty Norris

HOME ADDRESS: 2116 CR801B Cleburne TX 76031

PHONE: 817-933-3836

GROUP OR ORGANIZATION REPRESENTED: (If Any) City Ambulance

AGENDA ITEM: (If Any) EMS Agenda Item

(circle one): SUPPORT OPPOSE

ADDITIONAL COMMENT OR CONCERN: _____

Signature: 

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Spoke @ 9:36 CB

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: John Leal

HOME ADDRESS: 101 Elm Dr

PHONE: 817-757-6632

GROUP OR ORGANIZATION REPRESENTED: (If Any) AMR

AGENDA ITEM: (If Any) RFP ~~2024-23~~ 2014-303

(circle one): SUPPORT

OPPOSE

ADDITIONAL COMMENT OR CONCERN: _____

Signature: 

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Spoke @ 9:41 CB

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: Jake Morrison

HOME ADDRESS: 6025 Breckenridge Park Dr Alvarado TX 76009

PHONE: 682 465 0504

GROUP OR ORGANIZATION REPRESENTED: (If Any) THK Huguley

AGENDA ITEM: (If Any) _____

(circle one): SUPPORT OPPOSE

ADDITIONAL COMMENT OR CONCERN: Huguley's only statement is that the hospital has not chosen an agency to take over transports after Medstar closes.

Signature: 

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Spoke @ 9:43 CB

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: MARK KESSLER

HOME ADDRESS: 5504 Homestead Rd Arlington, TX 76017

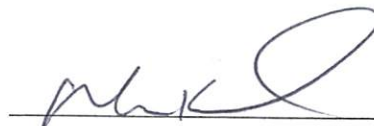
PHONE: 817 271-6828

GROUP OR ORGANIZATION REPRESENTED: (If Any) AME

AGENDA ITEM: (If Any) Ambulance Contract

(circle one): SUPPORT OPPOSE

ADDITIONAL COMMENT OR CONCERN: _____

Signature: 

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Spoke @ 9:45 CE

JOHNSON COUNTY COMMISSIONERS COURT
PUBLIC PARTICIPATION FORM

NAME: Michelle Grant

HOME ADDRESS: 809 Sierra Cir

PHONE: 409 939 7139

GROUP OR ORGANIZATION REPRESENTED: (If Any) Amr

AGENDA ITEM: (If Any) ESD Contract

(circle one): SUPPORT OPPOSE

ADDITIONAL COMMENT OR CONCERN: I am in support of Amr continuing the contract for Johnson County.

Signature: Michelle Grant

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Spoke @ 9:47 Cof