

**DEPARTMENT OF NEIGHBORHOOD
EMPOWERMENT WITNESS STATEMENT FORM**

FOR DEPT USE ONLY

Grievance # _____

Witness Form # _____

Witness Name: Dale Penn Contact Number: (818) 519-4100
Mailing Address: 9822 Chicopee Ave Email: dale@pennandassoc.com
Northridge CA 91325

Grievances are defined as set forth in the Los Angeles Administrative Code Section 22.818.

"The following information contained herein is within my own personal knowledge and relates only to facts and circumstances surrounding the Grievance submitted by B. Leveque on _____ regarding Porter Ranch Neighborhood Council."

I was on the PRNC ZOOM call for the duration of the call. As I waited for my opportunity to speak, Becky Leveque was attacked. My purpose on the call was to present a Neighborhood Purpose Grant request to PRNC board members on behalf of the non profit I represent, Supporters of Law Enforcement in Devonshire (S.O.L.I.D). I was appalled at this public attack. Becky Leveque was harassed, ridiculed, accused and censured publicly by what I can only describe as an angry cohort of PRNC members. It was an embarrassing, unfair attack!

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 10/2/2020

Name: Dale Penn Signature: Dale Penn

Department Review

Date witness form received: _____ Date witness form reviewed: _____

Witness form reviewed by: _____ Grievance number: _____