

**DEPARTMENT OF NEIGHBORHOOD
EMPOWERMENT WITNESS STATEMENT FORM**

FOR DEPT USE ONLY

Challenge # _____
Witness Form # _____

Witness Name: BARRY WEISS Contact Number: 818-257-3181
Mailing Address: 4270 SATSUMA AVE Email: BARRYWEISSLA@GMAIL.COM
STUDIO CITY, CA 91602

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 BETHSAFFMAN on 4/12/2016 regarding STUDIO CITY Neighborhood Council."

I was a volunteer for the SCNC election on Thurs, April 7, 2016 from 2pm-7:30pm. I helped with set up of the facility and during the voting period, I was at the entrance to the school, greeting voters.

Several times, I noticed candidates inside the boundary where they were not supposed to be. I noticed that there were a small few who did this numerous times.

Each time I saw an occurrence, I notified D.O.N.E. employees that I had observed this and, in some instances, was able to point these out when notifying the D.O.N.E. personnel. (In other words, they were still within the boundaries where they weren't supposed to be when I notified D.O.N.E. employees.)

Occasionally, I observed candidates walking toward the entrance where I was stationed talking with voters coming to vote.

I wasn't familiar enough with who these candidates were; I'd only identified them as candidates because I had seen them gathering with where the candidates were gathered and some I recognized from a candidates forum I had attended.

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

Date: 4/13/2016

Name: BARRY R. WEISS

Signature: [Signature]

Department Review

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

Witness form reviewed by: _____ Grievance number: _____