

**DEPARTMENT OF NEIGHBORHOOD
EMPOWERMENT WITNESS STATEMENT FORM**

FOR DEPT USE ONLY

Challenge # _____
Witness Form # _____

Witness Name: Patty Kirby Contact Number: 818.209.8333

Mailing Address: 4434 Carpenter Ave. Email: patty.a.kirby@gmail.com
Studio City, CA 91607

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 Lila Chacin on April 12, 2016 regarding Studio City Neighborhood Council."

The registration forms: I first started having everyone complete a new form UNLESS it was exactly the same form as on the table. Then I was told to let all the forms (short or not), that people brought in with them (assumed gotten from the Internet) to go through. Steven said they would fix them at the registration or ballot table..... However some people still came back to me (forms table) to say they were told they had to come back and fill in the form we provided. Many people were upset by this time delay. Confusing with inconsistent directions on what to do.

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

Date: 4/14/16

Name: Patty Kirby Signature: 

Department Review

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

Witness form reviewed by: _____ Grievance number: _____