

CADIZ GROUNDWATER STORAGE & DRY-YEAR SUPPLY PROGRAM
SIGN IN SHEET

December 18, 2000 – Metropolitan Water District

PLEASE PRINT

Name DONALD KENDALL
Address 2100 OLSEN ROAD
City, State THOUSAND OAKS, CA Zip 91362
Phone number (optional) (805) 579-7113
Organization (if applicable) CALLEGUAS MWD

Name Richard K. Jemison
Address 26152 Orville Place
City, State LAGUNA Hills CA Zip 92653
Phone number (optional) 949-463-2921
Organization (if applicable) Southern California Water Committee

Name Richard Katz
Address 15233 Ventura Blvd
City, State S.O. CA Zip 91403
Phone number (optional) _____
Organization (if applicable) _____

Name Richard Hazlett
Address Dept. of Geology, Pomona College
City, State Claremont, CA Zip 91761
Phone number (optional) 909-621-8676
Organization (if applicable) Pomona College

Name MARY LILLET
Address 1701 CLINTON ST
City, State LA Zip 90026
Phone number (optional) _____
Organization (if applicable) _____

Name ED LABAAN
Address 93 MONARCH BAY
City, State DANA POINT CA Zip 92629-3409
Phone number (optional) (949) 499-2880
Organization (if applicable) Public

CADIZ GROUNDWATER STORAGE & DRY-YEAR SUPPLY PROGRAM
SIGN IN SHEET

2

December 18, 2000 - Metropolitan Water District

PLEASE PRINT

Name Scott Schmidt
Address 20121 Ventura Bl #203
City, State Woodland Hills CA Zip 91364
Phone number (optional) _____
Organization (if applicable) VICIA

Name Buss Lizaldu
Address 10327 Oak Ranch
City, State Escondido CA Zip 92026
Phone number (optional) _____
Organization (if applicable) Charmless CA

Name JIM PALECEK
Address 220 W. GRAND AVE
City, State ESCONDIDO CA Zip 92025
Phone number (optional) _____
Organization (if applicable) PALECEK + SKAJA, ATTORNEY

Name JAMES HAY
Address 1451 S. MORLANDS DR.
City, State TACOMA WA Zip 98405
Phone number (optional) _____
Organization (if applicable) _____

Name ANDREW SILVA
Address 399 N. D ST
City, State SAN BERNARDINO, CA Zip 92401
Phone number (optional) 909 386-3880
Organization (if applicable) SAN BERNARDINO SUN

Name MELINDA RHO
Address 111 N. HOPE ST.
City, State LOS ANGELES Zip 90012
Phone number (optional) (213) 367-1329
Organization (if applicable) ACWA

CADIZ GROUNDWATER STORAGE & DRY-YEAR SUPPLY PROGRAM
SIGN IN SHEET

3

December 18, 2000 - Metropolitan Water District

PLEASE PRINT

Name Suzan Gilliam
Address 6136 Adobe Rd.
City, State Trenton CA Zip 92277
Phone number (optional) 760-367-6799
Organization (if applicable) Trenton Valley

Name Ramon Mendez
Address 58092 Los Coyotes Rd.
City, State Puca Valley CA Zip 92284
Phone number (optional) 760 228 2792
Organization (if applicable) D.E.R.T / M.B.R.E.D.C.

Name Sari Juma
Address 214 E. 1st St
City, State Redmond CA Zip 91711
Phone number (optional) 909-621-7148
Organization (if applicable) _____

Name Robin Ivy
Address 264 E Green St
City, State Clemont CA Zip 91711
Phone number (optional) 909-624-5522
Organization (if applicable) _____

Name David CZAMANSKE
Address PO Box 2522
City, State South Pasadena Zip 91031
Phone number (optional) (626) 458-8646
Organization (if applicable) Sierra Club

Name John Gillies
Address ~~4433~~ Desert Research Institute 2215 Raggio Pkwy
City, State Nevada NV Zip 89512
Phone number (optional) 775-674-7035
Organization (if applicable) _____

CADIZ GROUNDWATER STORAGE & DRY-YEAR SUPPLY PROGRAM
SIGN IN SHEET

4

December 18, 2000 - Metropolitan Water District

PLEASE PRINT

Name JOE BIRMAN
Address 1617 SILVERWOOD DRIVE
City, State LOS ANGELES CA Zip 90041
Phone number (optional) 323 258 6444
Organization (if applicable) MSI/WATER

Name Todd Shuman
Address 605 S. Adams St Apt 6
City, State Glendale CA Zip 91205
Phone number (optional) _____
Organization (if applicable) _____

Name Tasha Lee Stuart Shuman
Address 605 S. Adams St Apt 6
City, State Glendale CA Zip 91205
Phone number (optional) _____
Organization (if applicable) _____

Name GROVE BURNETT
Address PO BOX 1509
City, State Taos, NM Zip 87571
Phone number (optional) _____
Organization (if applicable) Western Environmental Law Center

Name Andrew Werner
Address 8053 La Jolla Hermosa
City, State La Jolla CA Zip 92037
Phone number (optional) _____
Organization (if applicable) Group Triton

Name Tuan R Gonzalez, Legislative mgr.
Address 350 South Bixel Street
City, State Los Angeles CA Zip 90017
Phone number (optional) 213-580-7568
Organization (if applicable) LA Chamber of Commerce

CADIZ GROUNDWATER STORAGE & DRY-YEAR SUPPLY PROGRAM
SIGN IN SHEET

5

December 18, 2000 - Metropolitan Water District

PLEASE PRINT

Name FRANK ARONDEL
Address 2165 WYO DR
City, State LOS ANGELES Zip 90003
Phone number (optional) 534 0868
Organization (if applicable) _____

Name Tom Barnes
Address 2121 W. IShue #480
City, State LA CA Zip 90010
Phone number (optional) 323 953 6111
Organization (if applicable) _____

Name LEVAL LUND
Address 3245 LOWRY
City, State LA CA Zip 90027
Phone number (optional) 323 664-4432
Organization (if applicable) CE

Name Amy Chen
Address 700 N. Alameda 1-107
City, State LA Zip 90012
Phone number (optional) 213 6281294
Organization (if applicable) SOLOWA

Name Simon Henskoub
Address Western Environmental Law Center
City, State Taos NM Zip 87577
Phone number (optional) 505 751 0351
Organization (if applicable) _____

Name POWER EURETS
Address 5321 Amestoy Ave.
City, State ERKINJO, CA Zip 91316
Phone number (optional) 8
Organization (if applicable) _____

CADIZ GROUNDWATER STORAGE & DRY-YEAR SUPPLY PROGRAM
SIGN IN SHEET

6

December 18, 2000 – Metropolitan Water District

PLEASE PRINT

Name GLENN PADNICK
Address 1021 RIDGEDALE DR
City, State BEV. HILLS Zip 90210
Phone number (optional) (310) 285-2308
Organization (if applicable) NPCA

Name _____
Address _____
City, State _____ Zip _____
Phone number (optional) _____
Organization (if applicable) _____

Name _____
Address _____
City, State _____ Zip _____
Phone number (optional) _____
Organization (if applicable) _____

Name _____
Address _____
City, State _____ Zip _____
Phone number (optional) _____
Organization (if applicable) _____

Name _____
Address _____
City, State _____ Zip _____
Phone number (optional) _____
Organization (if applicable) _____

Name _____
Address _____
City, State _____ Zip _____
Phone number (optional) _____
Organization (if applicable) _____