



**Mental Health Services Act Housing Program
Liberty Lane Apartments
County of San Bernardino Department of Behavioral Health
Stakeholder Comment Form**

Thank you for your interest in the County of San Bernardino’s Liberty Lane Apartments. Please share your comments using this form by November 14, 2015.

What is your age?

- 0-17 yrs 18-24 yrs 25-59 yrs 60 + yrs

What is your gender?

- Male Female

What region do you live in?

- Central Valley Region
 Desert/Mountain Region
 East Valley Region
 West Valley Region

What group do you represent?

- Family member of consumer
 Consumer of Mental Health Services
 Law Enforcement
 School Personnel
 Community Agency
 Faith Community
 County Staff
 Human Services
 Health Provider
 Community Member

What is your ethnicity?

- Latino/Hispanic
 African American
 Caucasian/White
 Asian/Pacific Islander
 American Indian/Native American
 Other (specify) _____

What is your general feeling about the Liberty Lane Apartments project in the County of San Bernardino?

- Very Satisfied Somewhat Satisfied Satisfied Unsatisfied Very Unsatisfied

Please discuss the areas of the Liberty Lane Apartments project which you found to be positive.

What concerns and recommendations do you have regarding the Liberty Lane Apartments Housing Project?

Thank you again for taking the time to review and provide input on the Liberty Lane Apartments Project in the County of San Bernardino.