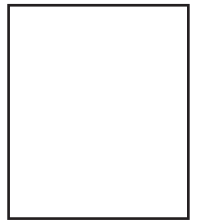




PUBLIC HEARING
Request-To-Speak Form



Meeting Date _____

TOPIC

NAME

(Please print name and spell phonetically if it is difficult to pronounce.)

OPTIONAL CONTACT INFORMATION *(for staff follow-up and clarification)*

Address: _____

Phone: _____ Email: _____

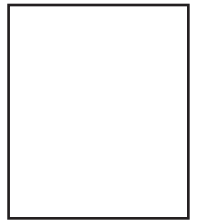
Are you a member speaking on behalf of a Board or Commission Neighborhood Association

Name of group: _____

Please submit form to staff at the "Information" table.



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