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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 12-4-2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.		
I wish to speak before the Name of City Agency, Department, Committee or Council					
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal Name: General comments					
_	on:				
Address:Street	City	State	Zip		
	Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:			Phone #:		
Client Address:					
Street	City	State	Zip		

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

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Date 12 4 1	5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before		ne of City Agency, Department, Committee o	r Council	
		comment, or to speak for or against a propo		
Name:		Evic Preven		Against proposal General comments
Business or Organiza	tion Affiliation:			
Address:				
Address:	Street	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF Y	OU ARE A PAIC	SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	ow:
Client Name:			F	Phone #:
Client Address:	Street	City	State	

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Date 4	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.			
I wish to speak before the		onci			
	Name of City Agency, Department, Commit	tee or Council			
Do you wish to provide general	public comment, or to speak for or against a p	proposal on the agenda? () For proposal			
Name:	John WALST	() Against proposal () General comments			
Business or Organization Affiliation:					
Address:Street	City	State Zip			
Business phone:	Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		Phone #:			
Client Address:	City	State Zip			

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Date 2-201 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Lame of City Agency, Department, Commi	Council File No., Agenda Item, or Case No.			
Do you wish to provide general publications:	lic comment, or to speak for or against a	proposal on the agenda? () For proposal () Against proposal () General comments			
Address:Street					
	City Representing:	State Zip			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		Phone #:			
Client Address:	City	State 7in			

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson