Date: 10/18/2017

I wish to speak before the Council

Street

Council File No., Agenda Item, or Case Item NO. (18) - 17-0279

State

Zip

Do you wish to provide general public comment, or to speak	for or against a proposal on the agenda?	General Comment	
Name: Asshole Herb Herman			
Business or Organization Affiliation:			
Address:Street	City	State	Zip
	·		—. F
Business Phone: Re	epresenting:		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROV	IDE CLIENT INFORMATION BELOW:		
Client Name:		Phone#:	
Client Address:			

NOTE: INFORMATION PROVIDED WILL BE MADE PART OF THE PUBLIC RECORD

City

Date: 10/18/2017

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Council File No., Agenda Item, or Case Item NO. (18) - 17-0279

Do you wish to provide general pul	olic comment, or to speak for or ag	ainst a proposal on the agenda?	General Comment	
Name: Fuck You Herman	Is Wayne			
Business or Organization Affiliation	:			
Address:				
	Street	City	State	Zip
Business Phone:	Representi	ng:		
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIE	ENT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address:				
	Street	City	State	Zip

Date: 10/18/2017

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State

Zip

I wish to speak before the Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? General Comment Name: HERMAN Business or Organization Affiliation: Address: _____Street City State Business Phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: ____ Phone#: Client Address:

NOTE: INFORMATION PROVIDED WILL BE MADE PART OF THE PUBLIC RECORD

Citv

Street

Date: 10/18/2017

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Council File No., Agenda Item, or Case Item NO. (18) - 17-0279

Do you v	wish to provide general public comm	ent, or to speak for or against a pro	posal on the agenda?	General Comment	
Name: _	Walsh				
Busines					
Address	:				
	Street		City	State	Zip
Busines	s Phone:	Representing:			
CHECK	HERE IF YOU ARE A PAID SPEAK	ER AND PROVIDE CLIENT INFOR	MATION BELOW:		
Client Na	ame:			Phone#:	
Client A	ddress:				
	Street		City	State	Zip

Date: 10/18/2017

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Name: _	Walsh				
Busines					
Address	:				
	Street		City	State	Zip
Busines	s Phone:	Representing:			
CHECK	HERE IF YOU ARE A PAID SPEAK	ER AND PROVIDE CLIENT INFOR	MATION BELOW:		
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Busines					
Address	:				
	Street		City	State	Zip
Busines	s Phone:	Representing:			
CHECK	HERE IF YOU ARE A PAID SPEAK	ER AND PROVIDE CLIENT INFOR	MATION BELOW:		
Client Na	ame:			Phone#:	
Client A	ddress:				
	Street		City	State	Zip