PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT *Name & Address are required	
NAME: Davis Bala	DATE: April 4,2003
ADDRESS: 645 Cosay Blyd.	PHONE: 904-479-6325
CITY: Jacksonylle COUNTY: Dive	STATE: FZ ZIP: 30211
REPRESENTING: FIRST GOOD ROWING QUB	
SIGNATURE:	I DO NOT WISH TO SPEAK
	W- 19 1 (
COMMENTS FROM THE PUBLIC SUBJECT: 2023-0216	inquiry re and status

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES PER SPEAKER.</u>
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.

(PLEASE READ THE REVERSE SIDE FOR INSTRUCTIONS ON SPEAKING BEFORE THE CITY COUNCIL.)

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT	*Name & Address are required	
NAME: O	inell Plucy DA	ATE: 04-4-2023
ADDRESS:	// E Adam st	PHONE:
CITY: Je	COUNTY: Der UR	_STATE: FL ZIP: 32262
REPRESENTING	; :	
SIGNATURE:	Cilm	I DO NOT WISH TO SPEAK
COMMENTS FR	OM THE PUBLIC SUBJECT:	

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES PER SPEAKER.</u>
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