

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Josh Melko DATE: 5-16-23

ADDRESS: 4324 Ripken Cir E PHONE: _____

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32224

REPRESENTING: Citizen

SIGNATURE:  I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: JEA

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

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