

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Wells Todd DATE: 1/16/24

ADDRESS: 9225 Waterglen Ln PHONE: _____

CITY: Jay COUNTY: Henry STATE: FL ZIP: 32256

REPRESENTING: Take Em Down Jay

SIGNATURE: Wells Todd I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: The funding used to remove

the confederate statues

2023-0874

**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.)

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT

*Name & Address are required

NAME: Van Nostrand, Roselle DATE: 12/16

ADDRESS: 1230 Talbot Ave PHONE: _____

CITY: Jax COUNTY: _____ STATE: F ZIP: 32205

REPRESENTING: Take em down

SIGNATURE: C. Roselle Van Nostrand I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: The monuments

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

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