

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER



PLEASE PRINT

*Name & Address are required

NAME: Tony Langhals DATE: 12/3/24
ADDRESS: 6346 Smallwood Rd PHONE: (904) 721-7611
CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32216

REPRESENTING: _____

SIGNATURE: Anthony Langhals ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: 2024-0871

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



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*Name & Address are required

NAME: Tammy Weinatz DATE: 12-2-24

ADDRESS: 10813 Cheatham Trl PHONE: 904 502-2101

CITY: JAX COUNTY: Duval STATE: FL ZIP: 32225

REPRESENTING: Gate

SIGNATURE: Tammy Weinatz ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: No on ROR 2024-0891

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*Name & Address are required

NAME: Linda Boagess DATE: 12-2-24

ADDRESS: 10386 Marble Egret Dr PHONE: 630-779-1688

CITY: JAX COUNTY: Duval STATE: F ZIP: 32257

REPRESENTING: _____

SIGNATURE: Linda Boagess ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: against rule 2024-0871

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*Name & Address are required

NAME: BLAKE HARPER DATE: 12-02-2026

ADDRESS: 3509 SURREAM RD PHONE:

CITY: JACKSONVILLE COUNTY: DUNAL STATE: FL ZIP: -57

REPRESENTING: CLUB

SIGNATURE:  ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: NO ON 8TV

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*Name & Address are required

NAME: JAMES CRANDALL DATE: 12/2/2024
ADDRESS: 242 SAN PABLO RD N PHONE: 904-237-1062
CITY: JAX COUNTY: DUVAL STATE: FL ZIP: 32225
REPRESENTING: SELF
SIGNATURE: [Signature] ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: 2024 - 0871

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*Name & Address are required

NAME: Lori Crunden DATE: 12/2/24

ADDRESS: 242 San Pablo Rd N PHONE: 904-237-1067

CITY: Jax COUNTY: Duval STATE: FL ZIP: 32225

REPRESENTING: _____

SIGNATURE: [Signature] ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: 2024-0871

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*Name & Address are required

NAME: Virginia McNulty DATE: 12 - 2 - 24

ADDRESS: 1881 Challen Ave. PHONE: (904) 625-7218

CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32205

REPRESENTING: self

SIGNATURE: Virginia McNulty ☐ I DO NOT WISH TO SPEAK

Please vote for Freedom of Speech.

COMMENTS FROM THE PUBLIC SUBJECT: 2024 - 0871

do NOT want you to amend Council Rule 4.505 (Disruption of meeting) Pt 5 (Rules of Decorum) ch 4 (Procedures)

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*Name & Address are required

NAME: Searcy Dannheim DATE: December 2, 2024

ADDRESS: (on file) 2118 St. Johns Ave PHONE: _____
Jacksonville, FL 32204

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

REPRESENTING: this community

SIGNATURE: [Signature] ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Oppose any limits on
public comment #7 Amend CR 4.505
Disruption of Meeting 2024-0871

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*Name & Address are required

NAME: KA Ellen Dirabeger DATE: 1/24
ADDRESS: 2448 Forest Blvd PHONE: 262-939-5864
CITY: Jacksonville COUNTY: Duval STATE: FL ZIP: 32246
REPRESENTING: freedom
SIGNATURE: KA Ellen Dirabeger ☐ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: _____

Constitution + Bible God Speech Remember
Thank You All who we are ✓

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Questions only

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*Name & Address are required

NAME: Trey Mills DATE: 12/2

ADDRESS: 1 Independent Drive Ste 1200 PHONE: 904 807 8216

CITY: Jax COUNTY: Duval STATE: FL ZIP: 32202

REPRESENTING: _____

SIGNATURE:  ☒ I DO NOT WISH TO SPEAK

COMMENTS FROM THE PUBLIC SUBJECT: Available for questions
re: Item 45 (2024-0892) *J-Pill*

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