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WE ASK THAT YOU SIGN UP TO SPEAK 24 HOURS IN ADVANCE OF THE MEETING

REQUEST TO ADDRESS CITY COUNCIL

**** Please Print Clearly ****

Name: _____ Ward: _____

Address: _____ Phone: _____

Subject Matter: _____

Date of Meeting You Wish To Speak At: _____ Signature: _____

Received By: _____ Date: _____ Time: _____