

REQUEST FOR RECOGNITION

If you wish to speak before the City Council, please fill out this form and hand it to City staff prior to the opening of the meeting. This document is a public record. **Comments are limited to 3 minutes for all options below.**

ddress:			
mail:	City	State	Zip
vish to speak during:			
PUBLIC COMMENT (Speak on	a subject <u>not</u> on the Council agenda.)		
GENERAL BUSINESS: (Speak of	on an item on the current Council agen	da.)	
Agenda Item:			
PUBLIC HEARING – TOPIC:			
omments:			

Comments are limited to 3 minutes or less.



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Name (please print): William Martinat
Address: _
Email: billing Stettler Supply. Com State Zip
I wish to speak during:
PUBLIC COMMENT (Speak on a subject <u>not</u> on the Council agenda.)
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Agenda Item:
PUBLIC HEARING – TOPIC:
Comments:

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