



# COMMISSION / COMMITTEE REGISTRATION FORM

COMMISSION/COMMITTEE \_\_\_\_\_ DATE 3/10/14

SUBJECT/ADDRESS/TOPIC \_\_\_\_\_ AGENDA ITEM NO. \_\_\_\_\_

YOUR NAME Jennifer Meier YOUR ADDRESS 1614 Fordem Ave

Please check the appropriate boxes: River's Edge ~~Apartment~~ Apartments

<input type="checkbox"/> <b>SUPPORT</b> <input type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions	<input type="checkbox"/> <b>OPPOSE</b> <input type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions	<input checked="" type="checkbox"/> <b>NEITHER SUPPORT NOR OPPOSE</b> <input type="checkbox"/> Wish to speak (3 min. limit) <input type="checkbox"/> Do not wish to speak <input type="checkbox"/> Available to answer questions
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At this meeting are you representing an organization or a person other than yourself?  Yes  No

*If you answered "no," STOP; you need not complete the rest of this form.  
 If you answered "yes," go on to the next questions on the back side of this form.*