



COMMISSION / COMMITTEE REGISTRATION FORM

COMMISSION/COMMITTEE <u>Board of Public Works</u>	DATE <u>3/21/18</u>
SUBJECT/ADDRESS/TOPIC _____	AGENDA ITEM NO. <u>7</u>

YOUR NAME <u>Mary Lynn Leune</u>	YOUR ADDRESS <u>700 Glenview Dr</u>
Please check the appropriate boxes:	
☐ SUPPORT ☐ Wish to speak (3 min. limit) ☐ Do not wish to speak ☐ Available to answer questions	☒ OPPOSE ☒ Wish to speak (3 min. limit) ☐ Do not wish to speak ☐ Available to answer questions
☐ NEITHER SUPPORT NOR OPPOSE ☐ Wish to speak (3 min. limit) ☐ Do not wish to speak ☐ Available to answer questions	

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.**



COMMISSION / COMMITTEE REGISTRATION FORM

COMMISSION/COMMITTEE _____	DATE <u>2/7/18</u>
SUBJECT/ADDRESS/TOPIC <u>Proj. # 11183 Street Reconstruction Project</u>	AGENDA ITEM NO. <u>7</u>

YOUR NAME <u>Lynn Zeckel</u>	YOUR ADDRESS <u>703 Emerson St.</u>
Please check the appropriate boxes:	
☐ SUPPORT ☐ Wish to speak (3 min. limit) ☐ Do not wish to speak ☐ Available to answer questions	☒ OPPOSE ☒ Wish to speak (3 min. limit) ☐ Do not wish to speak ☐ Available to answer questions
☐ NEITHER SUPPORT NOR OPPOSE ☐ Wish to speak (3 min. limit) ☐ Do not wish to speak ☐ Available to answer questions	

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