

FOOTHILL TRAILS DISTRICT NEIGHBORHOOD COUNCIL
SPEAKER CARD

DATE _____

I WISH TO SPEAK BEFORE _____
NAME OF CITY AGENCY, DEPT., COMMITTEE OR COUNCIL

DO YOU WISH TO PROVIDE...
GENERAL PUBLIC COMMENT ON _____

SPEAK FOR A PROPOSAL ON THE AGENDA _____

SPEAK AGAINST A PROPOSAL ON THE AGENDA _____

YOUR NAME _____

BUSINESS OR ORGANIZATION _____

ADDRESS _____
STREET CITY STATE ZIP

PHONE # _____ Email _____

REPERSENTING _____
 CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFO ON REVERSE SIDE.

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