



City of Venice  
Request to Speak (print legibly)

Name: GREG ROBERTS Date: 6/13/16  
Address: 341 W. VENICE AVE  
City: VENICE State FL Zip 34285  
Telephone: 485-2900  
Organization (if any): ATTORNEY

Please Check One

Audience Participation

Agenda - Topic: 2016-18

If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.

I swear or affirm, under penalty of perjury, that the evidence or factual representation, which I am about to give or present at the public hearing, held this 14 day of JUNE 20 16 is truthful.

Signature: [Handwritten Signature]

Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.