



City of Venice
Request to Speak (print legibly)

Name: Carolyn Welton Date: 8-22-17
Address: 617 Tamiami Trail N #11
City: Venice State: FL Zip: 34285
Telephone: 941-488-7460
Organization (if any): _____

Please Check One

- Audience Participation.
- Agenda - Topic: _____

Fisherman's Wharf

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 22 day of Aug 20 17 is truthful.

Signature: Carolyn Y. Welton

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



City of Venice
Request to Speak (print legibly)

Name: Scott Pidgett Date: 8/22/17

Address: _____

City: _____ State _____ Zip _____

Telephone: _____

Organization (if any): COV

Please Check One

Audience Participation

Agenda - Topic: Ord. 2017-28 (Fishermans Wharf)

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 22 day of Aug 2017 is truthful.

Signature: [Handwritten Signature]

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



"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Jeffrey A. Beane Date: 8/22/17

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Please Check One

Audience Participation.

Agenda - Topic:

Organization (if any): BEONE LAW FIRM

FISHERMAN'S UNION / Police/Fire Impact Fee

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Signature: _____

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Jim Lallins Date: 8/22/17

Address: 1001 AVENIDA DEL LILLO

City: VENICE State: FL Zip: 34085

Telephone: 488-6716

Organization (if any): BOONE LAW FIRM

Please Check One

Audience Participation.

Agenda - Topic: FISHERMAN'S WHARF

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 22 day of AUG 20 17 is truthful.

Signature: [Handwritten Signature]

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