City of Venice

	City of vehice
	Request to Speak (print legibly)
	Name: Kat Quast Date:
	Address: 101 W. Venia Ave
	City: Venice State: FC Zip: 34285
"City on the Gulf"	Telephone: 484 4722
Please Check One	
☐ Audience Participation	
□ Agenda - Topic:	Signafi
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 day of is truthful.	
Signature: Kat Reast	
Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.	