



"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: ROBERT LINCOLN Date: 9/24/19

Address: 2055 WOOD ST # 206

City: SARASOTA State: _____ Zip: 34234

City Resident: ☐ Yes ☒ No City Property Owner: ☐ Yes ☐ No

City Business Owner: ☐ Yes ☐ No Telephone No: _____

Organization (if any): DEP WINDYME DEP

Please Check One

☐ Audience Participation - Topic: _____

☒ During Agenda Item - Topic: ORD 2019-26

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 24 day of SEPT 20 19 is truthful.

Signature: [Signature]

Comments at public hearings and during audience participation are limited to five minutes per speaker for city residents, property owners and business owners, and two minutes for all others, unless otherwise noted.



City of Venice
Request to Speak (print legibly)

Name: TERRELL A. BOONE Date: 9/24/15

Address: _____

City: _____ State: _____ Zip: _____

City Resident: ☐ Yes ☐ No City Property Owner: ☐ Yes ☐ No

City Business Owner: ☐ Yes ☐ No Telephone No: _____

Organization (if any): BOONE LAW FIRM

Please Check One

- ☐ Audience Participation – Topic: _____
☐ During Agenda Item - Topic: MURPHY OAKS

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.

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Signature: _____

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name:

Dick Long

Date:

9/24/19

Address:

295 Marsh Creek

City:

Venice

State:

FL

Zip:

34282

City Resident: ☒ Yes ☐ No

City Property Owner: ☐ Yes ☐ No

City Business Owner: ☐ Yes ☐ No

Telephone No:

Organization (if any):

Please Check One

☐ Audience Participation - Topic:

☒ During Agenda Item - Topic:

2019-26 Murphy Oaks

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 24 day of Sept 2019 is truthful.

Signature:

[Signature]

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"City on the Gulf"

City of Venice
Request to Speak (print legibly)

Name: Robert Clark Date: 9/24/19

Address: _____

City: _____ State: _____ Zip: _____

City Resident: ☐ Yes ☐ No City Property Owner: ☐ Yes ☐ No

City Business Owner: ☐ Yes ☐ No Telephone No: _____

Organization (if any): CITY OF VENICE

Please Check One

☐ Audience Participation – Topic: 17-16R2 MURRAY OAKS

☐ During Agenda Item - Topic: _____

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 24 day of Sept, 2019 is truthful.

Signature: Robert Clark

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City of Venice

Request to Speak (print legibly)



Name: Herb Louisa Date: 9-24-19
Address: 36440 Woodward
City: Bloomfield Hills State MI Zip 48304

City Resident: ☐ Yes ☒ No City Property Owner: ☐ Yes ☒ No
City Business Owner: ☐ Yes ☒ No Telephone No: 248-291-5300

Organization (if any): _____

Please Check One

- ☐ Audience Participation – Topic: _____
☐ During Agenda Item - Topic: _____

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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 ____ 20____ is truthful.

Signature: Herb Louisa

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