	City of Venice Request to Speak (print legibly)	Applicant
	Name: John Henslick	Date: 7/22/14
	Address:	
	City: Sanasata State: FL	Zip:
"City on the Gulf"	Telephone: 741-1187	
Please Check One Audience Participation	Ord. # 2014-16	
Agenda - Topic:	VICA RZ #14-1RZ	

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 504 is truthful.

Signature:

		City of Venice Request to Speak (print legibly)	
	Name: Jeff	Shrum	Date: 7-22.14
	Address:	Hall	
	City: Venice	State:	Zip: 392 65
"City on the Gulf"	Telephone:		
Please Check One			
□ Audience Participation □ Agenda - Topic:	VECA		
	A		

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 2 day of 20 4 is truthful.
at the public hearing held this 22 day of 20 20 20 14 is truthful.
Signature:
Signature: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: Letsa Weintraub Date: 7/22/14
	Address: 5800 Lakewood Ranch Blurd
	City: <u>Savas da</u> State <u>FL</u> Zip <u>34240</u>
"City on the Gulf"	Telephone: <u>941/328-1030</u>
	Organization (if any): Neal Communities
Please Check One	
Audience Participation	
Agenda - Topic:	ICA

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Signature:

		City	of Venice	
		 Request to 	Speak (print legibly	y)
	Name: JA	ERY A. I	DONE	Date: 7/22/14
	Address:	· · · · · · · · · · · · · · · · · · ·	and the state of the	/
	City:		State:	_ Zip:
"City on the Gulf"	Telephone:			
Please Check One				
□ Audience Participation Agenda - Topic:	VICA	Rezone		
If you are going to present ev following oath. You are not r				quired to complete and sign the ipation or at a workshop.
I swear or affirm under penal at the public hearing, held this	ty of perjury, that the the second seco	the evidence or factual 4^{20} is truthful	representation, which al.	ch I am about to give or presen
Signature:				and the second of the second second
Comments at public hearing noted.	and during audien	ce participation are lin	nited to five minute	es per speaker unless otherwise

	City of Venice
	Request to Speak (print legibly)
	Name: JIM (OLLINS Date: 7/02/14
	Address: 1001 AVENIDAS DEL CIRCO
	City: VENILE State FL Zip 34385
"City on the Gulf"	Telephone: 488.67/4
	Organization (if any): BOONE LAW FIRM
Please Check One	
Audience Participation Agenda - Topic:	
	idence and/or testimony during a public hearing, you are required to complete and sign the equired to sign the oath if you are speaking at Audience Participation or at a workshop.

I swear or affirm, under penalty of perfury that the evidence or factual representation, which I am about to give or present at the public hearing, held this 2^{-1} day of 4^{-1} 2^{-1} is truthful.

0

Signature:

	City of Venice
	Request to Speak (print legibly)
	Name: Millard Yoder Date: 7/22/2014
	Address: 6400 Portession Pku
	City: Souroth State Flzip 31236
"City on the Gulf"	Telephone: Qd 907 19900
	Organization (if any): Startz
Please Check One Audience Participation Agenda - Topic: 	VICA on behalf of applicant
- ingenia Topic.	

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 2day of day of day is truthful.

Signature:

	City of Venice
	Request to Speak (print legibly)
	Name: Alec Hoffner Date: 7/22/14
	Address: 1523 8th Ave W. Swite B
	City: <u>Pelmetto</u> State <u>FL</u> Zip <u>34221</u>
"City on the Gulf"	Telephone: (941) 704 - 4167
	Organization (if any): ELO Consultants, Inc
Please Check One	
Audience Participation	

Audience Participation XAgenda - Topic: Vica / Willass of Miland

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 3442019 is truthful.

Signature:

	City of Venice			
	Request to Speak (print legibly)			
	Name: Maryann Grgic Date: 1/22/14 Address: 5800 Lakewood Ranch Blvd			
	City: Savasota D State FL Zip 34240			
"City on the Gulf"	Telephone: 328-112			
	Organization (if any): Neal Communities			
Please Check One				
□ Audience Participation	1 DI DI			
Agenda - Topic:	induced treliminary flat			
V	Induced Preliminary Plat			
If you are going to present ev	vidence and/or testimony during a public hearing, you are required to complete and sign the			
following oath. You are not re	equired to sign the oath if you are speaking at Audience Participation or at a workshop.			
	Ity of perjury, that the evidence or factual representation, which I am about to give or present 27 day of 20 4 is truthful.			

Signature

	City of Venice
	Request to Speak (print legibly)
	Name: Kevin Barton Date: 7-22-14
	Address: 1300 N. Jackson Rd
	City: Venice State: FL Zip: 39292
	Telephone: <u>9414164967</u>
Please Check One	
Audience Participation	ITIM D'I
□ Agenda - Topic:	VICH Project

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 July 20 14 is truthful.

Signature:

		City of Venice Request to Speak (print leg	ibly)
	Name: UAUF	- RASSMANN	Date: 7 - 22-14
	Address: 203	HIGH POINT 1	Dr
	City: UERICE	State: <u>F</u>	L Zip: 34292
"City on the Gulf"	Telephone: 90	11-468-925-	7
Please Check One			
Audience Participation	VICO		_

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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.

				, which I am about to give or pre	esent
at the public hearing, hel	d this 72 day of	5 Juny 20 14	_ is truthful.		
Signature:					

	City of Venice Request to Speak (print legibly)					
	Name: Pat Wayman Date: July 22, 20 Address: 3071 Border Rd	14				
	City: <u>Venice</u> State <u>FL</u> Zip Telephone: <u>941 412 0193</u>					
	Organization (if any):					
Please Check One Audience Participation Agenda - Topic: 						

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: _

	City of Venice							
	Request to Speak (print legibly)							
	Name: 17	TN	EAL		Date:	1/22/14		
	Address:	5800	LDKO WUG	on Rar	NCH	BL		
	City: Sova	SOTA	Sta	ate: FL	Zip:	34240		
"City on the Gulf"	Telephone: _	941 -	- 586 - 8					
Please Check One								
□ Audience Participation □ Agenda - Topic:	Villas	ies of	M. LAI	00				
			•					

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 23 day of 2014 is truthful.

Signature: