## City of Venice

|   | Request to Speak (print legibly) |                                 |                                      |
|---|----------------------------------|---------------------------------|--------------------------------------|
| City on the Gulf  | Name: Jim Ko                     | eenig                           | Date: 10/4/16                        |
|   |                                  |                                 |                                      |
|   | City: Venice                     | State:                          | Zip:                                 |
|   | Telephone:                       |                                 |                                      |
| Please Check One  Audience Participation  Agenda - Topic:       | L                                | City of Venice                  |                                      |
| If you are going to present of                                  | evidence and/or testimony of     |                                 | re required to complete and sign the |
| swear or affirm, under penal<br>at the public hearing, held the |                                  |                                 | which I am about to give or present  |
| Signature:  |                                  |                                 |                                      |
|   |                                  | icipation are limited to five m | inutes per speaker unless otherwise  |