

City of Venice

Request to Speak (print legibly)

Name: James Davis Date: 11/1/18

Address: _____

City: Venice State FL Zip _____

City Resident: ☐ Yes ☒ No Telephone No: _____

Organization (if any): Code Enforcement

Please Check One

☐ Audience Participation – Topic: _____

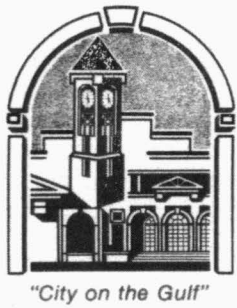
☒ During Agenda Item - Topic: _____

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 1 day of Nov 20 18 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: James Clinch Date: 11/1/18

Address: 401 W. Venice Ave.

City: Venice State: FL Zip: 34285

City Resident: ☒ Yes ☐ No

Telephone No: 941-234-6059

Organization (if any): City of Venice

Please Check One

☐ Audience Participation – Topic: _____

☒ During Agenda Item - Topic: 1024 Rheland Ave.

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 1 day of Nov, 2018 is truthful.

Signature: [Signature]

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