



Name: _	DA	VIEL	EARREIT	Date: 2/5/9	_
		_	MAGNOLLA AVE.		

City: DRUINDO	State FL Zip 32863
City Paridant: TVan TAI	City Property Oursey DVes DVe

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:

If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. Nou 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 his 5 day of FEB, 20.29 is truthful.

Signature:





"City on the Gulf"	Name: Ruchard Ellis Date: 2.5.9 Address: State Court Sulaion City: Savasson State Clip 34232 City Resident: Yes No City Property Owner: Yes No City Business Owner: Yes No Telephone No:
Please Check One Audience Participation During Agenda Item - T	Organization (if any): Deuberry Eaginess Topic: VPSF
following oath. You are not re	dence and/or testimony during a public hearing, you are required to complete and sign the quired to sign the oath if you are speaking at Audience Participation or at a workshop. y of perjury, that the evidence or factual representation, which I am about to give or present

Signature:

at the public hearing, held this say of 20 17 is truthful.

City of Venice

Request to Speak (print legibly)





"City on the Gulf"

Name: ROBERT GOODSON Date: 2/5/19		
Address: 1350 RINGEWOOD AVE		
City: VENICE State FL Zip 34292		
City Resident: Yes No City Property Owner: Yes No City Business Owner: Yes No Telephone No:		
Organization (if any): VELIUE POLICE DEPZ		

Please Check One				
☐ Audience Participation — Topic:				
During Agenda Item - Topic:	PUBLIC	SAFETY	FACILITY	

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.

Signature: That Godn





Name: HEYWOOD HOFFMAN Date: 2-5-19

Address: 217 AVBURN WOODS CIRCLE

City: Venice State FL Zip 34292

City Resident: Yes \(\text{No}\) City Property Owner: Yes \(\text{No}\) City Business Owner: \(\text{Yes}\) No \(\text{Telephone No:}\)

Please Check One
Organization (if any):

Audience Participation - Topic: NEW POLICE STATION 18-135P

During Agenda Item - Topic:

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Signature:

City of Venice



Request to Speak (print legibly)



"City on the Guil"	Name: Copyrd Wore Date: 2 5 9 Address: Gog Cunt Copyrd Copyr
Please Check One Audience Participation During Agenda Item	

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:

City of Venice

Request to Speak (print legibly)

Name: CAPA CAPA Date: 2/5/9

Address:

City: State Zip

City Resident: Yes No City Property Owner: Yes No City Business Owner: Yes No Telephone No:

Organization (if any): ITY OF VENICE

Please Check One
Addience Participation — Topic: /8-/35P
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 day of Estate 20 I is truthful.

Signature: August 1 is truthful.



	Reducst to Speak (print region)
	Name: Ed Lavalle Date: 2/5/2019 Address: 401 West Venice Ave Venice Cy Hall City: 1/9nde State FL Zip 34285 City Resident: Yes \(\text{No}\) City Property Owner: Yes \(\text{No}\) City Business Owner: \(\text{Yes} \) No Telephone No: \(\text{94-812-7398}\)
Please Check One Audience Participation During Agenda Item - T	Organization (if any): CITY of VENICE Topic: Pusik Safety Faculty Plan

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 5 day of 20 9 is truthful.

Signature: