



City of Venice
Request to Speak (print legibly)

Name: CHRIS SIMMONS Date: 2-11-19
Address: 179 TOSCAVILLA BLVD
City: North Venice State FL Zip 34275

City Resident: ☒ Yes ☐ No City Property Owner: ☐ Yes ☐ No
City Business Owner: ☐ Yes ☒ No Telephone No: 571-201-7209

Organization (if any): VENICE NATURALLY

Please Check One

☐ Audience Participation – Topic: _____
☒ During Agenda Item - Topic: Partnership (requested speaker)

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 11 day of Feb 2019 is truthful.

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.