

APRIL AS CHILD ABUSE PREVENTION MONTHIF YOU WISH TO SPEAK TO CITY COUNCIL, **PRINT** YOUR NAME, ADDRESS, AND EMAIL.

NAME (print)	ADDRESS AND ZIP CODE	Email
✓ Karen Mack	10225 E Burnside PDX 97216	
✓ Michelle Reynolds	234 SE 7th Ave, PDX 97214	mreynolds@uacn.org