

PARKS BOND OVERSIGHT COMMITTEE REPORT

IF YOU WISH TO SPEAK TO CITY COUNCIL, **PRINT** YOUR NAME, ADDRESS, AND EMAIL.

NAME (print)

ADDRESS AND ZIP CODE *(Optional)*

Email *(Optional)*

NAME (print)	ADDRESS AND ZIP CODE <i>(Optional)</i>	Email <i>(Optional)</i>
✓ Charles Bridgeman JOHNSON		
C. ELINSTEI		