Agenda Item 663

## **TESTIMONY**

## 10:35 AM TIME CERTAIN

## CHILDREN'S LEVY ALLOCATION COMMITTEE FUNDING RECOMMENDATIONS

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

NAME (PRINT)	ADDRESS AND ZIP CODE (Optional)	Email <i>(Optional)</i>
Stor Stanfler		
Thesa Rull	2	
iliana Wehry		
*		

Date 06-14-2017

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