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Agenda Item 305 | TESTIMONY | REGULAR AGENDA

HOUSING DEVELOPMENT CENTER CONTRACT

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

NAME (PRINT)	ADDRESS AND ZIP CODE *(Optional)*	Email *(Optional)*
Shedrick J. Wilkins	945 NW Naito Pkwy Apt Portland, OR 97209	wilkinsshedrick@yahoo.com

Date 03-28-2018

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