TESTIMONY

9:30 AM TIME CERTAIN

A HOME FOR EVERYONE & LOAN FOR RESIDENTIAL FACILITY

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

NAME (print)	ADDRESS AND ZIP CODE	Email
I TOE WASh	7348 SE VIVEION ST	PANENSY TOXE PLOMIBET. DE
1 Sreightning		
M. ENG		
Charles JOHNSON	650 NW irv& Dorren's PLC	Rindra opdx@live.com