Agenda Item 77 TESTIMONY 9:45 AM TIME CERTAIN

COMPREHENSIVE ANNUAL FINANCIAL REPORT (CAFR)

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

NAME (print)	ADDRESS AND ZIP CODE	Email
✓ Lightning	Lightning Watchdog POX	
✓ Joe Walsh		

Date 01-27-16

Page 1 of 1