

SAFE CITIES NETWORK LEGAL SERVICES PROVIDER

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

NAME (PRINT)

ADDRESS AND ZIP CODE (Optional)

Email (Optional)

✓ Robert west		
✓ EDITH GILLS		
✓ Maggie		
✓ Charles Bridges Ane JOHNSON		
✓ USA Lease	ICS	
✓ Victoria Muirhead	ILL	
✓ Lightning Super Humanity		