

Item # 802

TESTIMONY

2pm Time
Certain11X13 Housing Preservation CampaignIF YOU WISH TO SPEAK TO CITY COUNCIL, **PRINT** YOUR NAME, ADDRESS, AND EMAIL.

NAME (print)

ADDRESS AND ZIP CODE

Email (optional)

✓ Lightning		
✓ Crystal Elinski	POB 8973 PDX 97207 OR USA	CRYSTAL.ELINSKI@gmail.com

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