## **PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER**

PLEASE PRINT *Name & Address are required	
NAME: EUzabeth Fiuppelli	DATE: 4/10/Q5
	5 PHONE: 203 983 8382
CITY: Jacks 801/11/e county: De	wal STATE ZIP: 3aaa4
REPRESENTING: Timucuan Parks F	andation/ Deval Aduban
SIGNATURE: Elizabeth M Fugoe	☐ I DO NOT WISH TO SPEAK
	2. 1111 C. N. D. C. E.
COMMENTS FROM THE PUBLIC SUBJECT: PURPLE BLUCCO	in An Creek Freselve
tote park assue of rever	tional & communal shung
Hervesting	

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES</u> PER SPEAKER. NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.

(PLEASE READ THE REVERSE SIDE FOR INSTRUCTIONS ON SPEAKING BEFORE THE CITY COUNCIL.)