

**Correspondence Between
Staff and Applicant
Approval Letter**



REQUEST TO SPEAK

1

Request to Speak cards must be submitted to City Staff BEFORE public testimony begins.

Public testimony is limited to three (3) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) FR. Doug LORIG MEETING DATE 25 MAY 2011

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS _____ ZIP _____

HOME PHONE 480-734-1479 WORK PHONE SAME

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☐ I WISH TO DONATE MY TIME TO _____

☒ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING Med Marijuana dispensary

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HOW TO ADDRESS THE BOARD AND COMMISSION

The Chair will call your name when it is your turn to speak

Approach the podium and state your name and address for the record

Groups wishing to speak are encouraged to select a spokesperson to represent the views of the group

Public testimony is limited to three minutes per speaker *(At the Chair's discretion speakers representing two or more persons may be granted additional time)*

A timer light located at the podium will help you to time your comments

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NAME (print) Linda Hoge MEETING DATE 5-25-11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8755 E Solano Dr ZIP 85250

HOME PHONE 480-991-2192 WORK PHONE 480-606-4560

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Another speaker

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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NAME (print) Marc Tuite MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) St. Maria Goretti

ADDRESS 8248 E. Lippizan Trl., Scottsdale ZIP 85258

HOME PHONE 480-483-2633 WORK PHONE _____

E-MAIL ADDRESS (optional) Mtuite@bephoenix.com

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Another Speaker

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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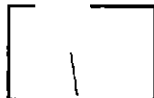
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NAME (print) Molly Kallee MEETING DATE 5/25/2011

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8212 E Devonshire Ave ZIP 85251

HOME PHONE _____ WORK PHONE _____

E MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING PUBLIC COMMENT * CONCERNING _____

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NAME (print) E. HOPE M. RIVERON/GRUVER MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) GRANT REEF & MC DONALD DR. NEIGHBORHOOD

ADDRESS 8508 E. MC DONALD DR. SCOTTSDALE AZ ZIP 85250

HOME PHONE 480-481-6446 WORK PHONE _____

E-MAIL ADDRESS (optional) N/A

☒ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO _____

☒ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING 4ed call Mari Juana Dispusary

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REQUEST TO SPEAK

Handwritten signature: Karen Pitico

9

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NAME (print)

Karen Pitico

MEETING DATE

5/25/2011

NAME OF GROUP/ORGANIZATION (if applicable)

ADDRESS

6037 N. 80th Way

ZIP

85250

HOME PHONE

WORK PHONE

602-291-2125

E-MAIL ADDRESS (optional)

KPitico@cox.net

☒ I WISH TO SPEAK ON AGENDA ITEM #

9

☐ I WISH TO DONATE MY TIME TO

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING

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NAME (print) Amy Kallee MEETING DATE 5/25/2011

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 842 E Devonshire Ave ZIP 85257

HOME PHONE (480) 993-3177 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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NAME (print) Ted Warner MEETING DATE 5/25/11
NAME OF GROUP/ORGANIZATION (if applicable) Resident in area of applicant site
ADDRESS 8420 E. Stella Scottsdale, AZ ZIP 85250
HOME PHONE 480-948-1965 WORK PHONE 480-287-2336
E MAIL ADDRESS (optional) wenmer106@aol.com

☒ I WISH TO SPEAK ON AGENDA ITEM # 9 ☐ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING PUBLIC COMMENT* CONCERNING _____

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PEOPLE'S 'T I SPEAK



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NAME (print) Leland Fairbanks, MD MEETING DATE 5-25-11

NAME OF GROUP/ORGANIZATION (if applicable) Keep AZ Drug Free and ARIZONANS CONCERNED ABOUT

ADDRESS 1860 E. Vinado Lane, Tempe, AZ ZIP 85284

HOME PHONE 480.820.3740 WORK PHONE _____

E-MAIL ADDRESS (optional) acasinca@MSN.COM

☒ I WISH TO SPEAK ON AGENDA ITEM # 9 ☐ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING Marijuana as illegal drug

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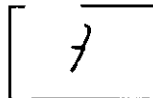
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REQUEST TO SPEAK

+ 1 Card



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NAME (print) MARIL REIBERT MEETING DATE 25 MAY 2011

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8313 E VALLEY VIEW ROAD ZIP 85250

HOME PHONE 480 947 3516 WORK PHONE _____

E MAIL ADDRESS (optional) _____

☒ I WISH TO SPEAK ON AGENDA ITEM # 9 ☐ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING PUBLIC COMMENT* CONCERNING _____

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NAME (print) KATHLEEN REIBURT MEETING DATE 25 MAY 2011

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8313 E. VALLEY VIEW ROAD ZIP 85250

HOME PHONE 480 947 3516 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO MARY REIBURT

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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REQUEST TO SPEAK + 3 Cards

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NAME (print) Kelly Hughes-Halpin MEETING DATE 3/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 6325 N. 83rd St. ZIP 85250

HOME PHONE 480-275-7303 WORK PHONE _____

E-MAIL ADDRESS (optional) khughesh@asu.edu.; kahughes91@hotmail.com

☒ I WISH TO SPEAK ON AGENDA ITEM # 9 ☐ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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NAME (print) Annie Hoyle MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8346 E Roma Ave, Scottsdale ZIP 85251

HOME PHONE (480) 481-9006 WORK PHONE N/A

E MAIL ADDRESS (optional) Fourhoyle@cox.net

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Kelly Halpin

☐ I WISH TO SPEAK DURING PUBLIC COMMENT * CONCERNING _____

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NAME (print) Steve Ring MEETING DATE May 25 2011

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8008 E. Tucker Ln ZIP 85250

HOME PHONE 480 483 7749 WORK PHONE NA

E-MAIL ADDRESS (optional) CabbyLou @ Cox. net

☒ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Lecky Hughes-Halpin

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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NAME (print) Kelly Halpin MEETING DATE 3/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8413 E. Mustang Trail, Scottsdale ZIP 85258

HOME PHONE 480 905 2358 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

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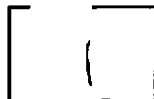
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NAME (print) Shellean Roberts MEETING DATE 5/25/2011

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 6031 N 81ST PL ZIP 85250

HOME PHONE _____ WORK PHONE _____

E MAIL ADDRESS (optional) sprobarts@cox.net

☒ I WISH TO SPEAK ON AGENDA ITEM # 24-UP-2011 ☐ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING PUBLIC COMMENT * CONCERNING _____

*Citizens may complete one Request to Speak Public Comment card per meeting and submit it to City Staff Public Comment time is reserved for citizen comments regarding non agendized items The Board and Commission may hear Public Comment testimony but is prohibited by state law from discussing items which are not listed on the agenda

This card constitutes a public record under Arizona law

Request to Speak cards must be submitted to City Staff before public testimony begins on that item

HOW TO ADDRESS THE BOARD AND COMMISSION

The Chair will call your name when it is your turn to speak

Approach the podium and state your name and address for the record

Groups wishing to speak are encouraged to select a spokesperson to represent the views of the group

Public testimony is limited to three minutes per speaker *(At the Chair's discretion speakers representing two or more persons may be granted additional time)*

A timer light located at the podium will help you to time your comments

A green light indicates the timer has been activated

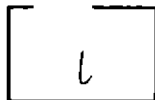
A yellow light indicates there is one minute remaining

A red light indicates the comment period has ended

WRITTEN COMMENTS Citizens who do not wish to address the Board and Commission in person may submit written comments by completing a yellow Written Comment card. Written Comment cards are available throughout the Kiva Forum and at the Staff table.



REQUEST TO SPEAK



Request to Speak cards must be submitted to City Staff **BEFORE** public testimony begins

Public testimony is limited to three (3) minutes per speaker

Additional time MAY be granted to speakers representing two or more persons

Cards for designated speakers and the person(s) they represent must be submitted together

NAME (print) Erin Nicoluzakis MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 4902 E Calle del Norte ZIP 85018

HOME PHONE 602854 1333 WORK PHONE _____

E MAIL ADDRESS (optional) enicolu@cux.net

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Shellean Roberts

☐ I WISH TO SPEAK DURING PUBLIC COMMENT * CONCERNING _____

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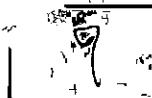
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REQ 1 ST 0 SPEAK



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Additional time **MAY** be granted to speakers representing two or more persons

Cards for designated speakers and the person(s) they represent must be submitted together

NAME (print)

Steven Niwluwakis

MEETING DATE

5/25/11

NAME OF GROUP/ORGANIZATION (if applicable)

ADDRESS

4902 E Calle del Norte

ZIP

85018

HOME PHONE

602 354-7333

WORK PHONE

602 820 1903

E MAIL ADDRESS (optional)

☐ I WISH TO SPEAK ON AGENDA ITEM #



I WISH TO DONATE MY TIME TO

Sheldon 2014

☐ I WISH TO SPEAK DURING PUBLIC COMMENT* CONCERNING

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REQUEST TO SPEAK

9

Request to Speak cards must be submitted to City Staff BEFORE public testimony begins.

Public testimony is limited to three (3) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) Mary Arnold MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 10487 E San Salvador ZIP 85258

HOME PHONE 480-596-9986 WORK PHONE 480 948-8381

E-MAIL ADDRESS (optional) momarnoldus@yahoo.com

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Shelham Robert

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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HOW TO ADDRESS THE BOARD AND COMMISSION

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Approach the podium and state your name and address for the record

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Public testimony is limited to three minutes per speaker *(At the Chair's discretion speakers representing two or more persons may be granted additional time)*

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WRITTEN COMMENTS Citizens who do not wish to address the Board and Commission in person may submit written comments by completing a yellow Written Comment card Written Comment cards are available throughout the Kiva Forum and at the Staff table



REQUEST TO SPEAK + 4 Cards

9

Request to Speak cards must be submitted to City Staff BEFORE public testimony begins.

Public testimony is limited to three (3) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) Kathleen Bies MEETING DATE 5.25.11

NAME OF GROUP/ORGANIZATION (if applicable) St. Maria Goretti Preschool

ADDRESS 6261 W. Granite Reef Rd ZIP 85250

HOME PHONE 480.948.8142 WORK PHONE 480.948.3606

E-MAIL ADDRESS (optional) Kbies@smgqz.org

☒ I WISH TO SPEAK ON AGENDA ITEM # 9 ☐ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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HOW TO ADDRESS THE BOARD AND COMMISSION:

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WRITTEN COMMENTS: Citizens who do not wish to address the Board and Commission in person may submit written comments by completing a yellow Written Comment card. Written Comment cards are available throughout the Kiva Forum and at the Staff table.



REQUEST TO SPEAK

7

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Additional time **MAY** be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) Diana Hollinshead MEETING DATE 5/25

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 5809 N. 83rd St Scottsdale ZIP 85250

HOME PHONE 480-529-1218 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Kathleen Bias

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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HOW TO ADDRESS THE BOARD AND COMMISSION

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REQUEST TO SPEAK

9

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Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) ROSEMARY FOSTER MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 7625 E. Camelback Rd. #383 B. ZIP 85251

HOME PHONE 480-945-6831 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Kathleen Bies

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" * CONCERNING _____

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HOW TO ADDRESS THE BOARD AND COMMISSION

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REQUEST TO SPEAK



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Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) SANTA GIULIANO MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8513 E ROVER AVE ZIP 85250

HOME PHONE 480-945-1805 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☐ I WISH TO DONATE MY TIME TO KAREN BIES

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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REQUEST TO SPEAK

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NAME (print) John Flier MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) ST. MARIAN VILLA

ADDRESS 8472 E. HALCOMB DR ZIP 85250

HOME PHONE 480-991-9162 WORK PHONE N/A

E-MAIL ADDRESS (optional) N/A

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO ST. MARIAN GENEALOGY

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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REQUEST TO SPEAK



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Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) Joe Meyer MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 6102 E. PARADISE BLVD SCOTTSDALE ZIP 85251

HOME PHONE _____ WORK PHONE 602-315-7420

E-MAIL ADDRESS (optional) _____

☒ I WISH TO SPEAK ON AGENDA ITEM # 9 ☐ I WISH TO DONATE MY TIME TO _____

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" * CONCERNING _____

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REQUEST TO SPEAK



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Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) Lisa Meyer MEETING DATE 5/24/11

NAME OF GROUP/ORGANIZATION (if applicable) SMC & OAH

ADDRESS 1102 East Lomax Blvd. ZIP 85251

HOME PHONE 480-990-3079 WORK PHONE —

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Joe Meyer

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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REQUEST TO SPEAK

1

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NAME (print) Claire Holmy MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8413 E. Mustang Trail Scotts ZIP 85258

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO for Meyer

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING Item 9

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REQUEST TO SPEAK



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Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) Kate Holm MEETING DATE 3/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8413 E. Mustang Trail Scottsdale ZIP 85258

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Vol Meyer

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING Agenda Item #9

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REQUEST TO SPEAK



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NAME (print) Jeanne Maher MEETING DATE 5.26.11

NAME OF GROUP/ORGANIZATION (if applicable) OLPH/SMA Schools + Churches

ADDRESS 4525 N. 87th Place Scottsdale AZ ZIP 85257

HOME PHONE (480) 433-2932 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Joe Meyer

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

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Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) Breton Holtry MEETING DATE 5/25/11

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 8413 E. Mustang Trail Scott ZIP 85258

HOME PHONE 480 905 2358 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Joe Meyer

☐ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING Item 9

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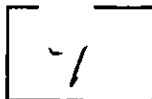
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NAME (print) Alexis Doering MEETING DATE 5-28-2011

NAME OF GROUP/ORGANIZATION (if applicable) St Maria Goretti School

ADDRESS 6261 N Granite Reef ZIP _____

Bus
~~HOME~~ PHONE 480 948 3606 WORK PHONE _____

E MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO Joe Meyer

☐ I WISH TO SPEAK DURING PUBLIC COMMENT * CONCERNING _____

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Approach the podium and state your name and address for the record

Groups wishing to speak are encouraged to select a spokesperson to represent the views of the group

Public testimony is limited to three minutes per speaker *(At the Chair's discretion speakers representing two or more persons may be granted additional time)*

A timer light located at the podium will help you to time your comments

A green light indicates the timer has been activated

A yellow light indicates there is one minute remaining

A red light indicates the comment period has ended

WRITTEN COMMENTS Citizens who do not wish to address the Board and Commission in person may submit written comments by completing a yellow Written Comment card. Written Comment cards are available throughout the Kiva Forum and at the Staff table



REQUEST TO SPEAK



Request to Speak cards must be submitted to City Staff BEFORE public testimony begins.

Public testimony is limited to three (3) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) EARL SHERMAN MEETING DATE 5/25/01

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 5450 N. 78th Way ZIP 85250

HOME PHONE 480 424 7329 WORK PHONE 248 930 8059

E-MAIL ADDRESS (optional) _____

☒ I WISH TO SPEAK ON AGENDA ITEM # 6 ☐ I WISH TO DONATE MY TIME TO _____

☒ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING 11

*Citizens may complete one Request to Speak "Public Comment" card per meeting and submit it to City Staff. "Public Comment" time is reserved for citizen comments regarding non-agendized items. The Board and Commission may hear "Public Comment" testimony, but is prohibited by state law from discussing items which are not listed on the agenda.

This card constitutes a public record under Arizona law.

Request to Speak cards must be submitted to City Staff before public testimony begins on that item

HOW TO ADDRESS THE BOARD AND COMMISSION

The Chair will call your name when it is your turn to speak

Approach the podium and state your name and address for the record

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REQUEST TO SPEAK



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NAME (print) Barbara A. Topping MEETING DATE 5-25-61

NAME OF GROUP/ORGANIZATION (if applicable) CITY/3ETV

ADDRESS 5037 N 81 STREET ZIP 85253

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO EARL SPREANAN

☒ I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING _____

*Citizens may complete one Request to Speak "Public Comment" card per meeting and submit it to City Staff. "Public Comment" time is reserved for citizen comments regarding non-agendized items. The Board and Commission may hear "Public Comment" testimony, but is prohibited by state law from discussing items which are not listed on the agenda.

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HOW TO ADDRESS THE BOARD AND COMMISSION

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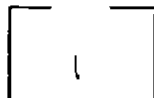
A yellow light indicates there is one minute remaining

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WRITTEN COMMENTS Citizens who do not wish to address the Board and Commission in person may submit written comments by completing a yellow Written Comment card. Written Comment cards are available throughout the Kiva Forum and at the Staff table.



REQUEST TO SPEAK



Request to Speak cards must be submitted to City Staff **BEFORE** public testimony begins

Public testimony is limited to three (3) minutes per speaker

Additional time **MAY** be granted to speakers representing two or more persons

Cards for designated speakers and the person(s) they represent must be submitted together

NAME (print) RICHARD TOPPING MEETING DATE 5-25-11

NAME OF GROUP/ORGANIZATION (if applicable) CITIZEN

ADDRESS 5037 N 81 ST ZIP 85258

HOME PHONE _____ WORK PHONE _____

E MAIL ADDRESS (optional) _____

☐ I WISH TO SPEAK ON AGENDA ITEM # _____ ☒ I WISH TO DONATE MY TIME TO EARL SHERMAN

☐ I WISH TO SPEAK DURING PUBLIC COMMENT* CONCERNING _____

*Citizens may complete one Request to Speak Public Comment card per meeting and submit it to City Staff Public Comment time is reserved for citizen comments regarding non agendized items The Board and Commission may hear Public Comment testimony but is prohibited by state law from discussing items which are not listed on the agenda

This card constitutes a public record under Arizona law

Request to Speak cards must be submitted to City Staff before public testimony begins on that item

HOW TO ADDRESS THE BOARD AND COMMISSION

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