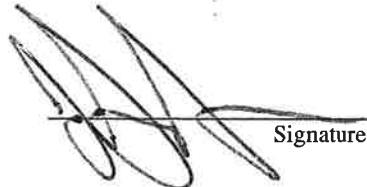


SPEAKER'S CARD (Please Print)Agenda# GNAME MJ WATERSADDRESS 3040 Le Conte St
Melb FL 32940
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELF BREVARD IRL COALITIONSUBJECT / Agenda # IRLI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature3/5/20
Date**SPEAKER'S CARD (Please Print)**Agenda# 411NAME John SupinADDRESS 261 Sacramento Ave NW
Palm Bay FL 32907
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELF H-1 H&K Property DevelopmentSUBJECT / Agenda # H-1I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
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Signature3/5/20
Date


SPEAKER'S CARD (Please Print)Agenda# 51

NAME David Carbone
ADDRESS 9160 S Tropical Trl
Merritt Isl FL 32952
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # 52

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
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Signature

Date

SPEAKER'S CARD (Please Print)Agenda# 51

NAME Terry Gibson
ADDRESS 4394 NE Skyline Dr.
Jensen Beach, FL 34957
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF American Water Security Project

SUBJECT / Agenda # IRL budget

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
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Signature

3-5-20
Date

SPEAKER'S CARD (Please Print)

Agenda# J-1

NAME

Vince Lamb

ADDRESS

11590 Dragon Point Dr.Merritt Island, FL

CITY

STATE

STREET

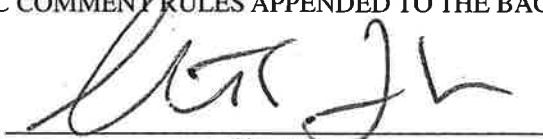
ZIP CODE

32952

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

Lagoon 2020 ProjectsI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Signature

7/5/20
Date

SPEAKER'S CARD (Please Print)

Agenda# J-1

NAME

Lew Kontrik

ADDRESS

3208 Bird Song CourtMelbourne

CITY

STATE

STREET

ZIP CODE

FL32934

ORGANIZATION YOU REPRESENT /

SELF

Brevard Indian River Coalition

SUBJECT / Agenda #

J-1I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
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Signature

8/5/20
Date

SPEAKER'S CARD (Please Print)

Agenda#

JS

NAME

PAUL Alfrey

ADDRESS

1058 Alexia STMILBOURN

CITY

STATE

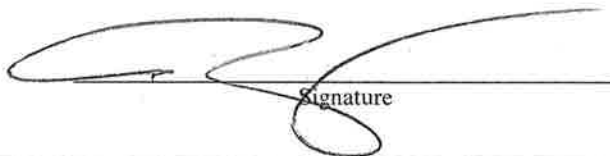
STREET

32935

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda #

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Signature

3/5/2020
Date**SPEAKER'S CARD (Please Print)**

Agenda#

JS

NAME

Wayne Frey

ADDRESS

700 S Park AveTinsville

CITY

STATE

STREET

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELFBCSD

SUBJECT / Agenda #

JSI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
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Signature

3/5/20
Date