

SPEAKER'S CARD (Please Print)

NAME Cindy Flachmeier

ADDRESS 3600 W King St.

Titusville CITY # FL STATE STREET 32780 ZIP CODE

ORGANIZATION YOU REPRESENT Aging Matters

SUBJECT Aging

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

Cindy Flachmeier
Signature

4/11/17
Date

AGENDA #

SPEAKER'S CARD (Please Print)

I.C.
3

NAME Becky Lemstrom
ADDRESS 1425 Aurora Rd
Melbourne # FL STREET 32935
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Women's Center
SUBJECT Public Comments - CBO - Housing/
Human Services

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

Becky Lemstrom
Signature

4/11/17
Date

AGENDA #
I.C.

SPEAKER'S CARD (Please Print)

I.B.
1

NAME Pam LaSalle
ADDRESS 2380 CAMBERLY CIR
MELB. # FL STREET 32940
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT _____
SUBJECT EEL

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

Pam LaSalle
Signature

4-11-17
Date

AGENDA #
I b.

SPEAKER'S CARD (Please Print)

I.C.
①

NAME Joseph McDowell

ADDRESS 116 Jamaica Drive
Cocoa Beach # FL STREET 32931
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Links of Hope

SUBJECT CBD Funding

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

Joseph L McDowell 4/11/17
Signature Date

AGENDA #
I.C.

SPEAKER'S CARD (Please Print)

I.C.
②

NAME Pam LaSalle

ADDRESS 2380 CAMBERLY CR
MELBOURNE # FL STREET 32940
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT _____

SUBJECT CHARITABLE ORGANIZATIONS

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

Pam LaSalle 4-11-17
Signature Date

AGENDA #
I.C.

SPEAKER'S CARD (Please Print)

I.A.
①

NAME Vinnie Taranto Jr

ADDRESS 313 10th Ter

Indialantic CITY FL STATE 32903 STREET ZIP CODE

ORGANIZATION YOU REPRESENT LEAD Brevard

SUBJECT Ia

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

Vinnie Taranto Jr
Signature

4/11/17
Date

AGENDA #
I.A.

SPEAKER'S CARD (Please Print)

I.A.
②

NAME JOSH FIELD

ADDRESS 5845 NEWBURY CIR

MELBOURNE CITY FL STATE 32940 STREET ZIP CODE

ORGANIZATION YOU REPRESENT LEAD BREARD

SUBJECT COUNTY FUNDING

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

[Signature]
Signature

4/11/17
Date

AGENDA #
I.A.

SPEAKER'S CARD (Please Print)

I.A.
③

NAME Pam LaSalle

ADDRESS 2380 CAMBERLY CIR
MELBOURNE # FL STREET 32840
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT _____

SUBJECT GEN. GOVT

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

Pam LaSalle
Signature

4-11-17
Date

AGENDA #
<u>IA</u>

SPEAKER'S CARD (Please Print)

I.A.
④

NAME DAVE PASLEY

ADDRESS 4740 S. Hwy A1A
Mel Bch # FL STREET 32851
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT _____

SUBJECT BUDGET 2018

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

[Signature]
Signature

4/11/17
Date

AGENDA #
<u>IA</u>