

SPEAKER'S CARD (Please Print)

Agenda# _____

NAME Sara Ann ConklingADDRESS 1305 S. Lakemont Dr.Cocoa

CITY

FL

STATE

STREET

32922

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELFSUBJECT / Agenda # III Transit Services

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



Signature

2-21-19

Date

SPEAKER'S CARD (Please Print)Agenda# VNAME Fred McMillionADDRESS 5008 N.W. Hwy 1Cocoa

CITY

FL

STATE

STREET

32927

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELFSUBJECT / Agenda # Transportation Disadvantage
infrastructure, transit

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



Signature

2/21/19

Date

SPEAKER'S CARD (Please Print)Agenda# V

NAME

Alex Greenwood(2)

ADDRESS

P.O. Box 1077 (Breward Ave)
Cocoa FLA 32923
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

PROPERTY TAX INCREASES

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

Signature

Date

2/21/19**SPEAKER'S CARD (Please Print)**Agenda# 2

NAME

ARLENE M. NAULTY

ADDRESS

3924 Southwind Drive
W. Melbourne FL 32904
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF National Federation of the
Melbourne Space Coast Chapter

SUBJECT / Agenda #

County Transportation Blend

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

Signature

Date

2/21/19

SPEAKER'S CARD (Please Print)

Agenda# _____

NAME

Joseph B Naulty

ADDRESS

3924 Southwind DriveW. MelbourneFL

STREET

32904

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

Melbourne Space Coast Chapter of the National Federation of the Blind

SUBJECT / Agenda #

County Transportation Budget

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

Signature

Date

SPEAKER'S CARD (Please Print)Agenda# 3

NAME

Camille Tate

ADDRESS

2945 Kemblewick DriveMelbourneFL

STREET

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

Melbourne Space Coast Chapter of the NFB

SUBJECT / Agenda #

Transportation
Transit Services

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

Signature

Date

SPEAKER'S CARD (Please Print)

Agenda# _____

NAME Judy B. Healy
ADDRESS 2215 Pine Meadow Ave
W. Melbourne FL 32904
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF Brevard County Commission on AgingSUBJECT / Agenda # BO funding

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

Judy B. Healy
Signature

2/21/19
Date