

SPEAKER'S CARD (Please Print)

Agenda# D8

NAME Mary Spher ①

ADDRESS 825 Cliftons Cove Ct

Cocoa # FL STREET 32926
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Turtle Coast Sierra Club

SUBJECT / Agenda # Septic ordinance

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

Mary Spher
Signature

9-25-18
Date

SPEAKER'S CARD (Please Print)

Agenda# D8

NAME Suzanne Cummins ②

ADDRESS 1500 W Eau Gallie Blvd

STREET
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Home Builders & Contractors Association of Brevard

SUBJECT / Agenda # Septic Tank

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

Suzanne Cummins
Signature

9/25/18
Date

SPEAKER'S CARD (Please Print)

Agenda# D8

NAME Elizabeth Baker ①

ADDRESS 1450 Taurus Ct

Merritt Island # FL STREET 32953
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # 8

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

Elizabeth Baker
Signature

9-25-18
Date

SPEAKER'S CARD (Please Print)

Agenda# D8

NAME George H. Rosentfield ⑥

ADDRESS 1289 Bonaventure Dr.

Melbourne # FL STREET 32940
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # D8

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

George H. Rosentfield
Signature

9/25/18
Date

SPEAKER'S CARD (Please Print)

Agenda# D-8

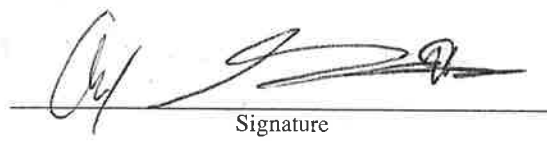
NAME Alex Gorichky (4)

ADDRESS 255 BEL AIR Ave
Merritt Island FL STREET
32953 ZIP CODE
CITY STATE

ORGANIZATION YOU REPRESENT / SELF IRL Capt. Collective

SUBJECT / Agenda # Septic

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


Signature

9-25-18
Date

SPEAKER'S CARD (Please Print)

Agenda# D8

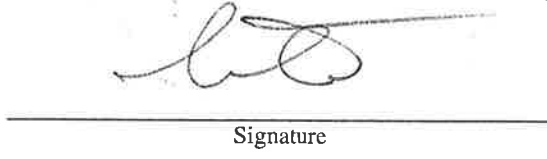
NAME Lew Kontrnik (3)

ADDRESS 3208 Bird Song Ct
Melbourne FL STREET
32934 ZIP CODE
CITY STATE

ORGANIZATION YOU REPRESENT / SELF Self

SUBJECT / Agenda # D8

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


Signature

9/25/18
Date

SPEAKER'S CARD (Please Print)

Agenda# D-8
(2)

NAME M J WATERS

ADDRESS 3040 Le Conte St
Melbourne FL 32940
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF Brevard Indian River Lagoon Coalition
SUBJECT / Agenda # D-8

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

Maury Waters
Signature

9/25/18
Date

SPEAKER'S CARD (Please Print)

Agenda# D-8
(3)

NAME GAIL MEREDITH

ADDRESS Satellite Beach
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF BIRLC
SUBJECT / Agenda # Septic

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

Gail Meredith
Signature

9/25
Date

SPEAKER'S CARD (Please Print)

Agenda# D2
(3)

NAME S. Elizabeth Adams

ADDRESS 4701 Marengo Lane
Titusville # FL STREET 32780
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # Budget

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

S. Elizabeth Adams
Signature

9-25-18
Date

SPEAKER'S CARD (Please Print)

Agenda# D8
(1)

NAME JOHN WINDSOR

ADDRESS 2324 S FAIRWAY DRIVE
MELBURNE # STATE FL STREET 32901
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF _____

SUBJECT / Agenda # D-8 - SEPTIC ORDINANCE

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

John Windsor
Signature

9/25/2018
Date

SPEAKER'S CARD (Please Print)

Agenda# D2

NAME Sara Ann Conkling ①

ADDRESS 1305 South Lakemont Dr.

Cocoa # FL STREET 32922
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF n/a

SUBJECT / Agenda # D/2 - operating Budget

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

Sara Ann Conkling
Signature

Date

SPEAKER'S CARD (Please Print)

Agenda# D2

NAME GAIL MEREDITH ②

ADDRESS _____

Satellite Beach # _____ STREET _____
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # Community organization
restoration funds

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

Gail Meredith
Signature

Date