

SPEAKER'S CARD (Please Print)

Agenda#

NAME

REV. J.B. DENNIS

①

ADDRESS

3710 CATHOLINA DR.

STREET

CITY

STATE

ZIP CODE

COCA, FL 32926

ORGANIZATION YOU REPRESENT /

SELF NATIONAL ACTION NETWORK

SUBJECT / Agenda #

SYSTEMIC RACISM OF THIS

COUNTY GOVERNMENT

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

Signature

Date

Rev. Dennis

2-23-21

Questions ^{Only} SPEAKER'S CARD (Please Print)

Agenda#

NAME

ISAN SCARF

F-16

ADDRESS

1310 SHADY LN

STREET

CITY

STATE

ZIP CODE

MI

FL

33452

ORGANIZATION YOU REPRESENT /

SELF

VMC

SUBJECT / Agenda #

PATRICIA VMC

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

Signature

Date

Patricia

2-23-21

SPEAKER'S CARD (Please Print) Agenda# JS

NAME Deborah Jaffe

ADDRESS 119 Algonquin Terrace

CITY Indian Harbor Beach FL STATE FL ZIP CODE 32937

ORGANIZATION YOU REPRESENT / SELF _____

SUBJECT / Agenda # Mandating Vaccination for Firefighter/EMTs personnel

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


Signature _____ Date 2/22/20

New Business

SPEAKER'S CARD (Please Print) Agenda# JS

NAME Katie Dyer

ADDRESS 203 Bella Coda Dr.

CITY ILH STATE FL ZIP CODE 32937

ORGANIZATION YOU REPRESENT / SELF _____

SUBJECT / Agenda # SS - Vaccine

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


Signature _____ Date 2.23.21

SPEAKER'S CARD (Please Print) Agenda # 57
NAME Sandra Sullivan (3)

ADDRESS 165 Dorset Ln.
CITY Dorset STATE VT ZIP CODE 32937

ORGANIZATION YOU REPRESENT /
SELF _____

SUBJECT / Agenda # Public Comment
Hightower Park Preserve

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

Sandra Sullivan 23 Feb 21
Signature Date

SPEAKER'S CARD (Please Print) Agenda # 57
NAME Henry Strawn (2)

ADDRESS Edwin St
CITY Co. VT. STATE VT. ZIP CODE 32923

ORGANIZATION YOU REPRESENT /
SELF _____

SUBJECT / Agenda # TRCO Airport update

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

[Signature] 2/23/21
Signature Date

SPEAKER'S CARD (Please Print)

Agenda#

NAME

Maie Rogerson

15

ADDRESS

1950 Mulberry St Melbourne

Melbourne

FL

32944

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

Vaccination Act

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

Maie Rogerson

Signature

Feb 23, 21

Date

Pub. Hearing

SPEAKER'S CARD (Please Print)

Agenda#

NAME

Theresa Mulikone

1

ADDRESS

231 Seaview St

CITY

FL

32951

ORGANIZATION YOU REPRESENT

President Seabreeze HOA

SUBJECT / Agenda #

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

Julia Livingston

Signature

2/23/21

Date

SPEAKER'S CARD (Please Print)

Agenda# 15

NAME Jade Zalewski

ADDRESS 416 School rd #103

CITY ILB STATE FL STREET # 32937 ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # Vaccination Act

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

Jade Zalewski

Signature

2-23-21
Date

SPEAKER'S CARD (Please Print)

Agenda# 15

NAME Melissa Johnson

ADDRESS 4440 Snow Ave

CITY Tishsvilla STATE FL STREET # 32780 ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # JS

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

[Signature]

Signature

2-23-2021
Date

SPEAKER'S CARD (Please Print)

Agenda#

NAME Denisse Gade

ADDRESS 5017 Kathy Dr.

CITY Titusville FL 32780

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # Vaccine mandate

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

Denisse Gade

Signature

02/23/21

Date

SPEAKER'S CARD (Please Print)

Agenda#

NAME Wesley Ryan

ADDRESS 2140 Old Dixie Hwy

CITY Titusville FL 32796

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # I-5, Vaccination and General Immunization Necessity Act

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

Wesley Ryan

Signature

2/23/2021

Date

SPEAKER'S CARD (Please Print)

Agenda #

6

NAME Michael Branson

ADDRESS 823 Glen Arden Way

STREET

ZIP CODE 92301

STATE

CA

CITY

Altamonte Springs

ORGANIZATION YOU REPRESENT

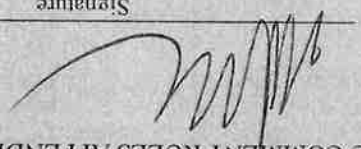
SELF-BRAND COURT / Firefighda Union

SUBJECT / Agenda #

15

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

Signature



Date

2/23/2021