

## The Board of County Commissioners values your participation

Please fill out this card if you wish to speak or record your sentiment regarding a public hearing item.

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Public Hearing Item:
🗶 Individual (3 minutes)
Group Speaker (see additional details on the back of this card)
Agenda date: 3/20/18
M I
Agenda item number (NOT case number):
Speaking: Only if a certary
For Against 🗆 Undecided 🗔
Waive speaking:
In Support 🗆 Against 🖵
(The Chairman will read this information into the record.)
7 6 1 1 - 1
Name: 13 Alm Aungst, Jr. / Address: 625 (D-rtst. presty
625 Conctist. Greg
Address:
City: <u>Clewnafer</u> Email: <u>RJA &amp; Maefaricon</u>
IZTIA DAGA FACILITY
Email: S J V) & MARTA (SM

## Please refer to the *Pinellas County Commission Public Participation & Decorum Rules* for details. Visit Pinellas County online at www.pinellascounty.org

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Public Hearing Item:
🕅 Individual (3 minutes)
Group Speaker (see additional details on the back of this card)
Agenda date: $\frac{3/20}{2018}$
Agenda item number (NOT case number): 4-1
Speaking: Only/FRCROESTEDBy/Awycen
Waive speaking:
In Support Against D (The Chairman will read this information into the record.)
Name: CILLARLES HOLLOWAY
Address: 1903 LEVING LN
City: CUBARWATER FL Zip: 33760
Email:

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