

COUNTY COMMISSIONERS' COURT PUBLIC PARTICIPATION FORM

Instructions: Fill out all appropriate blanks. Please print or write legibly.

NAME: Lisa Swenson

HOME ADDRESS: \_\_\_\_\_

PLACE OF EMPLOYMENT: CCM #

EMPLOYMENT TELEPHONE: \_\_\_\_\_

Do you represent any particular group or organization? no

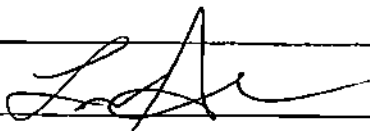
If you do represent a group or organization, please state the name, address and telephone number of such group or organization. \_\_\_\_\_

Which agenda item (or items) do you wish to address? 21

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In general, are you for or against such agenda item (or items)? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature: 

**NOTE:** This Public Participation Form must be presented to the Clay County Clerk prior to the time the agenda item (or items) you wish to address, are discussed before the Court.