## SPEAKER CARD

Date\_\_\_/\_\_/ Agenda item #\_230937

NAME (Please print)		, , , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	te mo	64107
EMAIL ADDRESS	ORGANIZATION REPRESEI	ZIP CODE
wish to address the Council: Yes No		
☑ In favor ☐ Opposed ☐ Other		
Comments:		<del></del>
	_	
Thank you for your interest and participation in city governments	ent.	_ KANSAS CITY

Please contact the City Clerk with any questions, 816-513-6401 or clerk@kcmo.org