

REGISTRATIONFORM

The Special Public Safety and Health Committee
meeting on July 29, 2019
City Hall, 3rd Floor
Room 301-B.
9:00 AM

Please PRINT	
Name: TOU PARIS	
Address: 145 FARHAUEN BLID	
City: DMBROVE ZIP CODE: 53102	
Organization Represented (if any):	-
Email address:	_
I wish to speak.	
I do not wish to speak.	
In Favor	
Oppose	

REGISTRATIONFORM

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City Hall, 3rd Floor

Room 301-B.

9:00 AM

Please PRINT
Name: 50h NAM 5
Address: 8200 Cochwar PC
City: WANTERS ZIP CODE: 53213
Organization Represented (if any):
Email address:
I wish to speak.
I do not wish to speak.
In Favor
Oppose



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9:00 AM

Please PRINT	
Name: Dimas Ocampo	
Address: 1320 Walnut Ridge Dr #200	
City: Ha Hard ZIP CODE: 53029	
Organization Represented (if any):	
Email address: dreams & vizance .com	_
<u></u> ✓I wish to speak.	
I do not wish to speak.	
In Favor	
Oppose	

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9:00 AM

Please PRINT	
Name: JOSE R ALDRETE	
Address: 5420 W JERELYN PL	
City: Me/us Avieces ZIP CODE: 53219	
Organization Represented (if any):	
Email address: CUCOSI @ HOTMAIL & COM	
I wish to speak.	
I do not wish to speak.	
In Favor	
Oppose	

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Please PRINT
Name: Molly SINGH-KING
Address: 1660 N. Prospect AVS #605
City: Milwankel ZIP CODE: 101 53202
Organization Represented (if any): GRISGIDA
Email address: Molly King @ Milwankel, Gov.
I wish to speak.
I do not wish to speak.
In Favor
Oppose

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OFFICE OF THE CITY CLERK CITY OF MILWAUKEE

REGISTRATIONFORM

The Special Public Safety and Health Committee meeting on July 29, 2019

City Hall, 3rd Floor

Room 301-B.

9:00 AM

Please PRINT
Name: ACOMO
Address: 4424 N. LAKE Drine
City: Mi/W ZIP CODE: 53217
Organization Represented (if any):
Email address: 6, FALLUCCA @ PALERMOSPIZZA. CON
I wish to speak. — which hat
I do not wish to speak.
In Favor
Oppose