COMMON COUNCIL / CITY CLERK'S OFFICE HISTORIC PRESERVATION COMMISSION

Relating to Item (number on agenda) Give brief title of item:	Relating to Item (number on agenda)
Name: Rehard Stefen Address: 1840 N. Prospect Bye files City: Milwall State 1 Zip 53204 E-Mail NIChs to Polythaul Compresenting: I AM IN FAVOR OF PROPOSAL AND I wish to speak	- Control of the Cont
City: Milwauker State 1 Zip 53205 E-Mail richstef not moth. C Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak	Give brief title of item: HISTORIC PLAGUE
Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak I do not wish to speak I do not wish to speak I wish to speak I wish to be placed on the mailing list / E_MAIL list for this item and notified of any further actions. **Moveral forms hips meeting room/new speaker forms** **COMMON COUNCIL / CITY CLERK'S OFFICE HISTORIC PRESERVATION COMMISSION** Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schlaman Give brief title of item: Name: Gal Fifch Address: City: Milwautel State WT Zip 53302 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak I do not wish to speak	Name: Richard Stefami Address: 1840 N. Prospect Ave #225
I AM IN FAVOR OF PROPOSAL AND I wish to speak	City: Milwauker State W/ Zip 5320 E-Mail richstef a hotmail. C
I wish to speak	Representing:
I AM OPPOSED TO THE PROPOSAL AND I wish to speak I do not wish to speak I wish to be placed on the mailing list / E_MAIL list for this item and notified of any further actions. **COMMON COUNCIL / CITY CLERK'S OFFICE HISTORIC PRESERVATION COMMISSION** Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautel State WT Zip 53 a02 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak I AM OPPOSED TO THE PROPOSAL AND	I AM IN FAVOR OF PROPOSAL AND
I wish to speak	I wish to speak I do not wish to speak
I wish to be placed on the mailing list / E_MAIL list for this item and notified of any further actions.	I AM OPPOSED TO THE PROPOSAL AND
COMMON COUNCIL / CITY CLERK'S OFFICE HISTORIC PRESERVATION COMMISSION Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schlaman Give brief title of item: Name:	I wish to speak I do not wish to speak
COMMON COUNCIL / CITY CLERK'S OFFICE HISTORIC PRESERVATION COMMISSION Date of Meeting: Relating to Item (number on agenda) # 9 plaque re' Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautee State W I Zip 53 902 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak I AM OPPOSED TO THE PROPOSAL AND	I wish to be placed on the mailing list / E_MAIL list for this item and notified of any further actions.
COMMON COUNCIL / CITY CLERK'S OFFICE HISTORIC PRESERVATION COMMISSION Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwauter State WI Zip 53802 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak I AM OPPOSED TO THE PROPOSAL AND	msword/forms/hpc meeting room/new speaker forms
Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautee State WI Zip 53 902 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I AM OPPOSED TO THE PROPOSAL AND	
Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautel State WI Zip 53 902 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I AM OPPOSED TO THE PROPOSAL AND	
Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautel State WI Zip 53 902 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I AM OPPOSED TO THE PROPOSAL AND	
Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautee State WI Zip 53 902 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I AM OPPOSED TO THE PROPOSAL AND	
Relating to Item (number on agenda) # 9 Plaque rei Donna Schleman Give brief title of item:	COMMON COLINCIL / CITY CLERK'S DEFICE
Relating to Item (number on agenda) # 9 Plaque rei Donna Schleman Give brief title of item:	
Name:	HISTORIC PRESERVATION COMMISSION
City: Milwaukee State WT Zip 53 202 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak I AM OPPOSED TO THE PROPOSAL AND	HISTORIC PRESERVATION COMMISSION Date of Meeting:
City: Milwaukee State WT Zip 53 202 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak I AM OPPOSED TO THE PROPOSAL AND	Date of Meeting: Relating to Item (number on agenda) # 9 plaque rei Donna Schleman
Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I AM OPPOSED TO THE PROPOSAL AND	Date of Meeting: Relating to Item (number on agenda) # 9 plague rei Donna Schleman Give brief title of item:
I wish to speak I do not wish to speak I AM OPPOSED TO THE PROPOSAL AND	HISTORIC PRESERVATION COMMISSION Date of Meeting: Relating to Item (number on agenda) # 9 plaque rei Donna Schluman Give brief title of item: Name:Gail Fitch Address:
I AM OPPOSED TO THE PROPOSAL AND	HISTORIC PRESERVATION COMMISSION Date of Meeting: Relating to Item (number on agenda) # 9 plaque re; Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautee State WI Zip 53 202 E-Mail
	Date of Meeting: Relating to Item (number on agenda) # 9 plaque rei Donna Schleman Give brief title of item: Name:
Lwish to speak	Date of Meeting: Relating to Item (number on agenda) # 9 plaque rei Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautee State WI Zip 53 202 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND
rwan to opean	Date of Meeting: Relating to Item (number on agenda) # 9 Plaque rei Donna Schleman Give brief title of item: Name: Gail Fifch Address: City: Milwautee State WT Zip 53202 E-Mail Representing: I AM IN FAVOR OF PROPOSAL AND I wish to speak I do not wish to speak

_____ I wish to be placed on the mailing list / E-MAIL list for this item & notified of any further actions.