

COMMON COUNCIL / CITY CLERK'S OFFICE  
HISTORIC PRESERVATION COMMISSION

Date of Meeting:

Relating to Item (number on agenda) 207 BRADY ST

Give brief title of item: \_\_\_\_\_

Name: Tom Vavra Address: PO BOX 70087

City: MILW State WI Zip 53207 E-Mail \_\_\_\_\_

Representing: CHURCH

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 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.

-----