

COMMON COUNCIL / CITY CLERK'S OFFICE
HISTORIC PRESERVATION COMMISSION

Date of Meeting:

Relating to Item (number on agenda) Modjeska Theatre

Give brief title of item: Mothball Status Extension request

Name: Bob SHEEHY Address: 10250 N. Range Line Ct.

City: Mequon State WI Zip _____ E-Mail bobsheehy@gmail.com

Representing: MSPDC Board member

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.

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HISTORIC PRESERVATION COMMISSION

Date of Meeting:

Relating to Item (number on agenda) Modjeska Theatre

Give brief title of item: MODJESKA MOTH BALL

Name: TOM VAVRA Address: 1905 S 1ST ST

City: MILW State WI Zip 53204 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 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.