COUNTY COMMISSIONERS' COURT

Public Participation Form

Instructions:	Fill out all app	ropriate l	blanks. P	lease print of	r write legibly
NAME:	MAG	ek C	nilla		,
HOME ADD	RESS: 115	12 0	101	5	· · · · · · · · · · · · · · · · · · ·
HOME TELE	PHONE:	,08-	347.	7769	
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EMPLOYME	NT PHONE: _	60	B- ZC	17-77	99
Do you repres	ent any particu	lar group	or orgai	nization?	NO
If you do repraddress and te	resent a group lephone numbe	or organ	uization, group o	please state r organizatio	the name,
* * *	item (or items) or items to be			And in case of the last of the	*****
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NOTE: This Public Participation Form must be presented to the Court Assistant 15 minutes prior to the Court being in session.