$\begin{array}{c} \textbf{JOHNSON COUNTY COMMISSIONERS COURT} \\ \underline{\textbf{PUBLIC PARTICIPATION FORM}} \end{array}$

NAME: Bill Allen
HOME ADDRESS: 1815 Creekwood Dr. Cleburne 76033
PHONE: 817 992 1703
GROUP OR ORGANIZATION REPRESENTED: (If Any) Flb First United
AGENDA ITEM: (If Any)
(circle one): SUPPORT OPPOSE
additional comment or concern: ARPA funds assistance as a 501/c) 3 financial aid for needing families
Signature:

NOTICE:

This Form must be presented to the Court Clerk (or designated Court Assistant) prior to the presiding officer calling the Meeting to order. Failure to timely return this form will prevent you from participating in the Meeting.