

The City welcomes your comments and requests that you present your remarks in a respectful manner, within established time limits, and focus on issues which directly affect the City or are within the jurisdiction. Thank you for your testimony.

Meeting Date: 8/25/2015

City of  
**SACRAMENTO**

## Request to Speak

Complete this form and  
return to the City Clerk

COMMENTS MAY BE LIMITED TO A SPECIFIC TIME ALLOTMENT

☐ Matters Listed on the Agenda

Agenda Item No: 3

Subject: Consent Calendar

☐ In Favor

☒ Oppose

☐ Matters **NOT** Listed on the Agenda

Subject: \_\_\_\_\_

### Personal Information:

Except for your name, the information requested below is voluntary and used by staff to contact you if necessary. When you request to speak before the legislative body, your name is included in the City's Official minutes. This form is subject to disclosure under the California Public Records Request Act.

Name: Mac White Address: \_\_\_\_\_

Organization/Business Name: \_\_\_\_\_

Council District No.: 5

☐ Not a City Resident

Phone: (916) 451-7275 Email: \_\_\_\_\_

### Notice to Lobbyist:

In compliance with City Code Section 2.15.150 you **MUST** identify yourself as a lobbyist and also verbally identify the client(s), business or organization you are representing.

I am a: ☐ Registered Lobbyist

☐ Unregistered Lobbyist

I represent: \_\_\_\_\_