## **CITY OF ORCHARD**

## CITY COUNCIL MEETING

## GENERAL ITEM PUBLIC COMMENT SIGN IN SHEET

Date of Council Meeting to Speak at:  Complete the following information and submit to the City Secretary. When your name is called, proceed to the table and state your name and address. Please limit your comments to 3 minutes.  Please Print			
		Name:	
		Address:	
Phone:	Email:		
1. Public comments sign in sheet must	be completed before speaking.		
2. Public comment limited to 3 minutes	s per speaker.		
3. No speaker may convey his or her tir	me to another speaker.		
4. Comments shall be courteous and re	spectful at all times.		
5. No person may use public comment for the purpose of campaign or advertisement.			
6. This is not a question and answer tin	ne and council cannot engage in conversation with the public.		
7. Questions and concerns about opera	ations should be addressed with City Staff during regular business hours.		
Agenda item			
Description			
Action sought			

Signature: \_\_\_\_\_ Date: \_\_\_\_\_