Forms must be complete before the start of the meeting.

No forms will be considered after the start of the meeting; except in the case of public hearings that are required by law (as noted on the agenda).

COMMITTEE HEARING REGISTRATION SLIP

COMMITTEE HEARING REGISTRATION SEIF
Name: Crystal P. Slater Date: 5-5-2022 PLEASE PRINT
Municipality of Residence: 414 Market St. La Crosse-WI 5460
I Represent: MyselF
Legislation: 22 · 0563
(Please fill out a separate sheet for each piece of legislation in which you are registering.)
Please check only one (1) of the following:
() I wish to SPEAK IN FAVOR of the legislation.
() I wish to SPEAK IN OPPOSITION of the legislation.
(Wish to REGISTER IN FAVOR of the legislation.
() I wish to REGISTER IN OPPOSITION of the legislation.
() I'm in favor of the legislation, but only here to answer questions.
() I'm in opposition of the legislation, but only here to answer questions.
(Please fill out a separate sheet for each piece of legislation in which you are registering.) Please check only one (1) of the following: () I wish to SPEAK IN FAVOR of the legislation. () I wish to SPEAK IN OPPOSITION of the legislation. () I wish to REGISTER IN FAVOR of the legislation. () I wish to REGISTER IN OPPOSITION of the legislation.