DETROIT CITY COUNCIL

REQUEST FOR RECOGNITION

NAME:	DATE:
ADDRESS - Physical:	
ADDRESS – Mailing:	
Phone and/or e-mail:	
<u>Presentation:</u> If you wish to make a presentation to the Council of a specific topic please provide a short outline of your presentation. If you require special equipment you will need to set up before the meeting begins. <i>Recommended time for Presentations is 10 minutes.</i>	
PRESENTATION TOPIC:	
Comments: If you wish to express an opinion or make comment out your comment for Council review before the meeting. If the Cocomment, it will occur at the appropriate place on the agenda. You the record of this proceeding. Recommended time for comments	ouncil chooses to respond to your ur written comment will be included in
COMMENTS:	
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