



PUBLIC COMMENT PERIOD  
ALBANY COMMON COUNCIL MEETING

Meeting Date: \_\_\_\_\_

Please include my name with those who wish to speak before the Common Council during the Public Comment Period on the above date. I understand my remarks may not exceed five (5) minutes.

-Please Print-

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tele: \_\_\_\_\_

Topic: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: 1/04/2010

E-mail address: \_\_\_\_\_