

Public Comment Sign-In Form



Board of Voter
Registration & Elections

Please complete this form if you wish to speak during the Public Comments portions of the meeting.
The clerk will begin accepting forms from those in line five (5) minutes prior to the start of the meeting.

County of Residence (required) _____ Election Day Precinct # (optional) _____

Subject (required) _____

Name (please print) _____

Address _____

Email _____

Phone _____

Date _____

Comments _____

