



# City of Sacramento

## LEGISLATIVE BODIES

### REQUEST TO SPEAK

COMPLETE THIS FORM AND RETURN TO THE CITY CLERK

MEETING DATE: 11/19/09

COMMENTS MAY BE LIMITED TO A SPECIFIED TIME ALLOTMENT

Matters LISTED on the Agenda

Matters NOT Listed on the Agenda

Agenda Item No: 7

Subject: \_\_\_\_\_

Subject: LOOSE IN THE STREET  
COLLECTION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In Favor

Oppose

#### Personal Information:

Except for your name, the information requested below is voluntary and used by staff to contact you if necessary. When you request to speak before the legislative body, your name is included in the City's official minutes.

Name: WALT SEIFERT Address: 877 53<sup>RD</sup> ST

Organization/Business Name: SACRAMENTO AREA BICYCLE ADVOCATES

Council District No.: 3

Not a City Resident

Phone: ( 916 ) ~~444~~ 455-7561 (H)  
444-6600 (W)

Email: saba@sacbike.org

**NOTICE TO LOBBYISTS:** In compliance with City Code Section 2.15.150 you **MUST** identify yourself as a lobbyist and also verbally identify the client(s), business or organization you are representing.

I am a  Registered Lobbyist

Unregistered Lobbyist and I represent:

\_\_\_\_\_