

City of Alvin  
City Council Meeting



## Public Comment Card

(Please Print Clearly)

NAME (required):

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RESIDENT AND/OR BUSINESS OWNER IN THE CITY OF ALVIN

YES

NO

PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

I wish to speak on the following:

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**Time is limited to three (3) minutes per person.**

Please place this card at the City Secretary's place on the dais in the City Council Chamber prior to the beginning of the meeting.