Orange County Library System Board of Trustees
Notice of Intent to Speak

Board Meeting Date: _____________________

Name: ___________________________________________________________

Address:  __________________________________________________________

City, State, ZIP code:   _______________________________________________

Phone Number:  ____________________________________________________

Email Address:  ____________________________________________________

Please check all that apply:  □ Card Holder  □ Live In District  □ Employee

Agenda Item to Address:  ____________________________________________

__________________________________________________________________

Please note that your comments are limited to three minutes.