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COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, January 18, 2019 12:19:34 PM
Last Modified: Friday, January 18, 2019 12:22:12 PM
Time Spent: 00:02:38
IP Address: 172.58.136.116

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Q1 Please provide some basic information

Witness Name: Mark F. Armstrong
Organization (if any): Chicago Urban Fine Arts Commonwealth
City/Town: Chicago
State: IL
ZIP: 60643

Q2 Tell us which meeting you wish to be recorded as a witness. If you don't know the meeting or date, we can help at 312.603.6398 or cookcounty.board@cookcountyil.gov. You can also look up using the County Calendar or the Forest Preserve Calendar. Please fill out a separate form for each meeting at which you wish to speak.

FPD Capital Development Committee 1/22/2019 9a

Q3 Tell us the File ID number (example 17-0000) of the item on which you are registering your position. If you don't know the number, we can help at 312.603.6398 or cookcounty.board@cookcountyil.gov. You can also look it up using the County Calendar or the Forest Preserve Calendar

2019-2023 Capital Development Plan

Q4 What do you want to do? **ATTEND THE MEETING and SPEAK IN FAVOR of a specific item (You may still add written comments below)**

Q5 Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to cookcounty.board@cookcountyil.gov

Not at this time
