



Mecklenburg County Board of Commissioners

Register to speak at a REGULAR BOCC Meeting

Instructions for Speakers

The Mecklenburg County Board of Commissioners invites all residents to Connect with Mecklenburg County by participating in the governing process. There is a Public Appearance agenda item near the beginning of every regular meeting for the purpose of allowing residents to address the Board on matters not appearing on the agenda. Residents also may sign up to speak about specific agenda items as the Board discusses them. Speakers may not use their time for campaign purposes or make budget requests. Budget requests must be addressed at Budget Public Hearings.

Speaker sign-up is now available anytime online using the form on this page. Please complete all the questions on the sign-up form. Those who include an email address will get an email confirming their registration.

Members of the public appearing before the Board will each be given three minutes to speak unless there are four or more speakers who wish to speak concerning the same matter. In that case, all persons wishing to speak on the same matter will be considered a group and given a total of ten minutes in which to speak. The group (four or more speakers) would divide the ten minutes among themselves or the ten minutes will be divided equally among the speakers by the Board Chairman.

The Board reserves the right to alter these rules on a case-by-case basis as necessary for the efficient and effective conduct of business.

Those with questions can contact Janice S. Paige, Clerk to the Board at 980-314-2912 or Janice.Paige@MecklenburgCountyNC.gov

Register Date:

11/29/2018 ...

Speaker List

Meeting Date:

12/04/2018 6:00PM

Agenda Item #:

Subject:

Color of Law

Please select one regarding the agenda item you will address:

In Favor In Opposition Neither

Additional Comments:

First Name:

Mary

Last Name:

Kelly

Suffix:

Home Address (House/Apt# and Street):

3011 Brandon Manor Lane

City:

Charlotte

Zip Code:

28211

Daytime Phone:

(704)-936-8630

Secondary Phone:

Email:

mary.mf.kelly@gmail.com

Special Assistance Needed at Meeting:

Yes No

Specify:

Update

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Register Date:

12/3/2018 ...

Speaker List

Meeting Date:

12/04/2018 6:00PM

Agenda Item #:

Subject:

Social justice

Please select one regarding the agenda item you will address:

In Favor In Opposition Neither

Additional Comments:

First Name:

Corine

Last Name:

Mack

Suffix:

Mack

Home Address (House/Apt# and Street):

2317 Sonoma Valley Drive

City:

Charlotte

Zip Code:

28214

Daytime Phone:

(347)-683-0264

Secondary Phone:

Email:

cmacknaacp@gmail.com

Special Assistance Needed at Meeting:

Yes No

Specify:

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Register Date:

11/30/2018 ...

Speaker List

Meeting Date:

12/04/2018 6:00PM

Agenda Item #:

Subject:

Carolinas Aviation Museum

Please select one regarding the agenda item you will address:

In Favor In Opposition Neither

Additional Comments:

First Name:

Stephen

Last Name:

Saucier

Suffix:

M.Ed.

Home Address (House/Apt# and Street):

4672 First Flight Drive

City:

Charlotte

Zip Code:

28208

Daytime Phone:

(704)-997-3770

Secondary Phone:

(828)-755-4721

Email:

stephen@carolinasaviation.org

Special Assistance Needed at Meeting:

Yes No

Specify:

Update

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Register Date: ...

Meeting Date: Agenda Item #:

Subject:

Please select one regarding the agenda item you will address:

In Favor In Opposition Neither

Additional Comments:

First Name: Last Name: Suffix:

Home Address (House/Apt# and Street):

City: Zip Code:

Daytime Phone: Secondary Phone:

Email:

Special Assistance Needed at Meeting:

Yes No Specify:

ADDRESSING THE BOARD OF COMMISSIONERS

MECKLENBURG COUNTY VISION STATEMENT
To Be The Best Local Government Service Provider

MECKLENBURG COUNTY MISSION STATEMENT
To Serve Mecklenburg County Residents By Helping Improve Their Lives And Community

MEETING DATE 12/4/2018

AGENDA ITEM Public appearance

To speak with the Board of County Commissioners, please complete this card and hand it to the Clerk to the Board prior to your matter of interest being discussed. Each person wishing to speak will have three (3) minutes; no more than ten (10) minutes will be allowed for public comment on any subject. If an auxiliary aid or service is needed to assist with communication, please indicate below.

NAME Cherry Reaves

MAILING ADDRESS 945 N. College St

CITY Charlotte ZIP CODE 28206 PHONE (HOME) _____ (WORK) _____

E-MAIL Cherry2017p7@gmail.com FAX # _____

SUBJECT Homelessness

IN FAVOR IN OPPOSITION _____ NEITHER _____ of Harry Jones you are forgiven
as you forgive you wrong @ in Jesus name He loves you
INDICATE COMMUNICATION ASSISTANCE NEEDED _____ to!