

**Exhibit A**

**POLK COUNTY COMMISSIONERS COURT PUBLIC PARTICIPATION FORM**

Instructions: Fill out all appropriate blanks. Please print legibly. This Form must be presented to the Polk County Clerk prior to the time the meeting is Called to Order. Persons submitting incomplete or unsigned forms will not be recognized.

DATE OF MEETING: \_\_\_\_\_

NAME: \_\_\_\_\_

HOME  
ADDRESS: \_\_\_\_\_

HOME  
TELEPHONE: \_\_\_\_\_

PLACE OF  
EMPLOYMENT: \_\_\_\_\_

EMPLOYMENT  
TELEPHONE: \_\_\_\_\_

Do you represent any particular group or organization? \_\_\_\_\_

If you do represent a group or organization, please state the name, address and telephone number of such group or organization.

\_\_\_\_\_

Which agenda item (or items) do you wish to address? (INDICATE BY AGENDA # AND TITLE)

\_\_\_\_\_

\_\_\_\_\_

In general, are you for or against such agenda item (or items)? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_