



**OFFICE OF THE CITY CLERK
JANICE M. WINFREY**

PETITION REPORT

PETITIONER: Citizen/Entity/Department

PETITION NUMBER: Mayor's Office - Legislative Liaison-0290

PETITION TYPE:

Choose an item.

SUMMARY:

CONCERNED DEPARTMENTS

Choose an item.

Choose an item.

Choose an item.

Choose an item.

Choose an item.

PETITIONER CONTACT INFORMATION:

Title:

Organization:

Address:

Email:

Phone: