

OFFICE OF THE CITY CLERK JANICE M. WINFREY

PETITION REPORT
PETITIONER:Citizen/Entity/DepartmentPETITION NUMBER:Mayor's Office - Legislative Liaison-0259

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: