



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

**PETITION REPORT**

PETITIONER: Citizen/Entity/Department

PETITION NUMBER: Mayor's Office - Legislative Liaison-0245

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**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: