



CONTRA COSTA
transportation
authority

SPEAKER CARD

Date: 6-21 Agenda Item #: 8D

Name: BRUCE DHILSON (if applicable)
☐ Support ☐ Oppose

Company/Affiliation: _____

Address: _____

Telephone #: _____ Email: _____

Please complete this card in advance of the meeting and hand it to a CCTA staff member. When recognized by the Chair, please approach the microphone and state your name, affiliation and/or place of residence. *Comments on agenda items or subjects within the Authority's jurisdiction are limited to three (3) minutes, or other such time period as determined by the Chair.* Comments may be summarized on the reverse side of this card.

Keeping Contra Costa Moving