

From: CLK Council Info
Sent: Friday, February 12, 2016 7:11 PM

Subject: Council Speaker Registration/Testimony

Speaker Registration/Testimony

All fields marked "(*)" are required and must be completed in order for this form to be valid.
Note: Registrations are not accepted prior to the agendas being posted.

| | |
|---|-------------------------|
| Name(*) | Mikiala Lidstone |
| Phone (*) | (808) 864-0013 |
| Email (*) | mikialak@gmail.com |
| Meeting Date (*) | 2016-02-17 |
| Council/PH Committee (*) | Council |
| Agenda Item (*) | Bill 9 |
| Your position on the matter (*) | Support |
| Representing (*) | Organization |
| Organization | Ulu A'e Learning Center |
| Do you wish to speak at the hearing? (*) | Yes |
| Written Testimony | |
| Testimony Attachment | |
| Accept Terms and Conditions (*) | 1 |

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