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**From:** CLK Council Info  
**Sent:** Tuesday, May 24, 2016 8:36 AM

**Subject:** Budget 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(*)	Dwight Gilman
Phone (*)	8086231532
Email (*)	waikalaniwoodlandshawaii@gmail.com
Meeting Date (*)	2016-06-01
Council/PH Committee (*)	Budget
Agenda Item (*)	Bill 15
Your position on the matter (*)	Support
Representing (*)	Organization
Organization	
Do you wish to speak at the hearing? (*)	Yes
Written Testimony	
Testimony Attachment	
Accept Terms and Conditions (*)	1

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