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COMPLETE

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Q1 Please provide some basic information

Witness Name: **George Blakemore**

Q2 Tell us which meeting you wish to be recorded as a witness. If you don't know the meeting or date, we can help at 312.603.6398 or cookcounty.board@cookcountyil.gov. You can also look up using the County Calendar or the Forest Preserve Calendar. Please fill out a separate form for each meeting at which you wish to speak.

**County Health and Hospitals Committee 4/24/2018
1p**

Q3 Tell us the File ID number (example 17-0000) of the item on which you are registering your position. If you don't know the number, we can help at 312.603.6398 or cookcounty.board@cookcountyil.gov. You can also look it up using the County Calendar or the Forest Preserve Calendar

All

Q4 What do you want to do?

ATTEND THE MEETING and SPEAK FOR INFORMATION ONLY (You may still add written comments below)

Q5 Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to cookcounty.board@cookcountyil.gov

No
