



**Orange County
Older Adults Advisory Commission
(OCAAC)**

**General & Committee Meetings
SPEAKER REQUEST FORM**

Meeting Date: _____



- ⇒ Completed speaker request form must be deposited with the designated OCAAC staff member prior to the Chair's calling of the Public Comments.
- ⇒ Testimony will be limited to (3) minutes per speaker.
- ⇒ When you are called to speak, please stand and clearly state your name for the record.
- ⇒ Please address your comments to the Commission as a whole. Comments to individual Commission members or staff are not permitted.
- ⇒ Keep your comments brief, to the point, and do not repeat prior testimony so all persons who wish to speak have an opportunity to do so.

*Disclosure of the information below is **optional** but would enable the Commission or County Staff to reach you, if necessary.*

Name: _____

Organization: _____

Address: _____

City/St/Zip: _____

Phone Number: _____

Email Address: _____