Cameron County Commis Agenda Request Form - P		urt			
rigenua Request Form - I	i cochtation			No	
Date:	Meeting	Date Request	:		
Department Name:	Contact Person:				
Phone:		Fax:			
		Signature:			
Organization/Individual Information	l		Date of F	Presentation:	
Name: (Individual or Group):					
Name of Presenter (s):					
Contact Person (s):					
Address:	City:	S	tate:	Zip Code	
Phone:					
Type of Presentation:  Audio/Visual    Length of Presentation:	Speech	Both		Handouts	
<u>Background</u> :					