



COUNCIL MEETING

DATE _____

ITEM 4 – PETITIONS/PRESENTATIONS

1. Name
Address
Contact Phone No:
Email

2. Representing (name of organisation/group/business/self)
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3. Title of Petition/Presentation
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4. Summary of Petition/Presentation
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5. Copy forwarded to Executive Officer yes/no
(Email: eo@sop.wa.gov.au)