

State of Louisiana



FY 2015 Consolidated Annual Performance and Evaluation Report

CITIZEN PARTICIPATION COMMENT FORM

Please print

Name: _____

Representing _____
(e.g. myself, municipal or parish government, private agency, constituent group, other)

Address: _____

Phone: _____ Fax: _____ Email: _____

Date: _____ Site of Hearing: _____ Time: _____

Special Interest Area(s): Check all which apply
___Community Development ___ Affordable Housing___ Homeless Shelter and Services___ Housing Opportunities for Persons with AIDS

Comments:

(Continue on the next page of form or use additional pages as needed)

Submit at public hearing or mail to: LA Office of Community Development, State Capital Annex,
PO Box 94095, Baton Rouge, LA 70804-9095, FAX 225/342-1947 (due no later than June 24, 2016)