CLOSE-OUT PUBLIC HEARING SIGN-IN SHEET

Community Name: _____ Date: _____

1. White/Caucasian
2. African-Americac/Black
3. Asian
4. American Indian/Alaskan Native
5. Native Hawaiian/Other Pacific Islander
6. American Indian/Alaskan Native & White
7. American Indian/Alaskan Native & African-American/Black
8. Asian & White
9. African-American/Black & White
10. Other Multi-Racial
11. Hispanic

* Please enter the corresponding number with your race/ethnicity

Name	Race/ Ethinicty	Organization/ Representing	Phone	Email