



HOWARD COUNTY COUNCIL
AFFIDAVIT OF AUTHORIZATION
TO TESTIFY ON BEHALF OF AN ORGANIZATION

I, BRENT LOVELESS, have been duly authorized by
(name of individual)

PTACHC to deliver testimony to the
(name of nonprofit organization or government board, commission, or task force)

County Council regarding CB 86, CR 163, CR 166 to express the organization's
(bill or resolution number)

support for / opposition to / request to amend this legislation.
(Please circle one.)

Printed Name: BRENT Loveless

Signature: Brent Loveless

Date: 11/15/21

Organization: PTACHC

Organization Address: 5451 Beaverkill Rd Columbia MD 21044

Number of Members: Representing PTA's at all HCPSS sites

Name of Chair/President: Srini Gorantla

This form can be submitted electronically via email to councilmail@howardcountymd.gov no later than 2 hours prior to the start of the Public Hearing.

