ANNA CITY COUNCIL

AGENDA REQUEST

NAME: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

ADDRESS: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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PHONE #: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PLEASE BRIEFLY EXPLAIN THE DETAILS OF WHAT YOU WISH TO DISCUSS WITH THE COUNCIL:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

MANY ISSUES CAN BE ADDRESSED THROUGH EMPLOYEES AND/OR DEPARTMENT HEADS. HAVE YOU PREVIOUSLY SPOKEN TO ANYONE ELSE WITH THE CITY REGARDING THIS ISSUE?

* YES

IF YES, WHO DID YOU SPEAK TO AND WHEN?

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* NO

WILL YOU BE ATTENDING THE MEETING?

* YES
* NO

MEETING ATTENDANCE DATE **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PLEASE NOTE THAT THE COUNCIL MEETINGS ARE ON THE FIRST AND THIRD TUESDAYS OF EACH MONTH AT 5:00 PM AT THE ANNA CITY HALL COMMUNITY CENTER. PUBLIC COMMUNICATIONS ARE PLACED NEAR THE BEGINNING OF THE MEETING AND ARE LIMITED TO 5 MINUTES.