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**AGENDA ITEM REQUEST**

AGENDA ITEM REQUESTS ARE TO BE TURNED IN TO TOWN HALL BY 5:00 P.M. 1 WEEK PRIOR TO THE REQUESTED COUNCIL MEETING DATE.

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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# TIME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I REQUEST THE FOLLOWING ITEM ON THE AGENDA FOR THE REGULAR/SPECIAL

COUNCIL MEETING TO BE HELD ON \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_P.M.

PLEASE STATE ITEM EXACTLY AS YOU WISH IT TO APPEAR ON THE AGENDA:

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BACKGROUND: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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RECOMMENDED MOTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Contact Name/Phone Number

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Council Member Approval