

City of Etna

Agenda Request

Date of Meeting:
Spokesperson(s):
Is this for Discussion \square or are you requesting an Action \square
Subject/Request:

Please provide a description of the request and attach supporting documentation:

Will there be a financial impact to the City? □ Yes □ No If Yes, \$_____

Will this require a budget increase?
Yes
No Account:_____

Please describe:

NOTE: Agenda requests must be received no less than <u>four working days</u> before the date of meeting. Return this form and supporting documentation to address below.