

# CITY OF FALLS CITY

## REQUEST FOR AGENDA ITEM

If you have a specific item that you would like to put on the City Council agenda, please list your name, address, telephone number, and the specific description of your request. The item will be reviewed and possibly scheduled for a future meeting, or forwarded to City staff for appropriate action.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Description of Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_