



City of Etna

Agenda Request

Date of Meeting: '' _____

Spokesperson(s): _____

Is this for Discussion ☐ or are you requesting an Action ☐

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, \$_____

Please describe:

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