

Please submit, completed, by 4:30 p.m., Wednesday, preceding the Council meeting.

**CITY OF RONAN
207 MAIN SW
RONAN, MONTANA 59864
Telephone: (406) 676-4231
Fax: (406) 676-4232**

Agenda Item -- Request Form

Council Meeting Date: _____

Who is requesting item to be placed on the agenda? _____

Telephone number:

How can we contact you with questions?

How would you like the agenda item worded? _____

Will you be asking for a vote? ____ Yes ____ No

If yes, what specifically are you asking for a vote on? _____

If this is a discussion item, what is the context of the issue? _____

Please note:

All supporting documentation must be provided by the Wednesday preceding the Council meeting and no additional handouts will be considered for action at the Council meeting.