

# City of Janesville

227 Main Street

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## REQUEST TO BE ON COUNCIL AGENDA

(Request must be made prior to 12:00pm (noon) on the Wednesday preceding the council meeting)

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

Address:

\_\_\_\_\_  
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\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Reason for Request (Please be Specific)

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Date of Council Meeting: \_\_\_\_\_

Today's Date and Time: \_\_\_\_\_

Signature:

\_\_\_\_\_