City of Marquette

CITIZEN'S ISSUE/COMMENT

Briefly state your issue/complaint/suggestion/idea:
When did issue occur? (Time/Date) Where did issue occur?

(Complete if applicable)

When did issue occur? Time_____ Date _____

Where did issue occur? _____

Citizen (your) Name: _____

Address: _____

Contact Phone: _____ (circle one) Day / Evening

SIGNATURE: _____ Date: _____

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cc: [ ] Mayor [ ] Council [ ] Street/Parks Super. [ ] Water/Sewer Super. [ ] Other:_____

Addressed at Council Mtg? [ ] Yes [ ] No

Response to Citizen? [ ] Yes [ ] No If so, when:_____ How?_____