## CITY OF LONG BEACH, MISSISSIPPI P.O. BOX 929 201 JEFF DAVIS AVENUE LONG BEACH, MISSISSIPPI 39560 TELEPHONE: (228) 863-1556 FAX: (228) 865-0822 cityclerk@cityoflongbeachms.com

FOR OFFICE USE
ONLY
DATE RECEIVED:
VERIFY DOCUMENTS:
SUBMITTEDNONE
TIME:

(signature)

BY:

REQUEST TO BE PLACED ON AGENDA FOR MEETING OF BOARD OF ALDERN	1EN
(PLEASE PRINT)	

Name of Person Ma	nking Request:					
			Fax:			
E-Mail Address:						
Name of Person Ad	dressing Mayor and Board of .	Aldermen:				
(If different from above						
Address:		Telephone:	Fax:			
-	on of Specific Subject Matter to and generalizations):					
	-	ed, please use the back of this for				
(Regular meetings are f	irst and third Tuesday at 5:00 p.m., L	ong Beach City Hall Meeting Ro	om, 201 Jeff Davis Avenue.)			
		-	<b></b>			
<i>v</i> 1	n:Personally Address					
(check one or more)			-			
	Photos/Video/Slide	esOther	(Specify Below)			
Other:						
* * *	* * * * * * * * <u>PLEASE RE</u>	AD CAREFULLY * *	* * * * * * *			
Requests and	d (10) copies of <u>all accompany</u>	<u>ving documents MUST</u> be	filed with the City Clerk no			
later than 12	:00 P.M. (NOON) the FRID	DAY preceding Tuesday's 1	neeting.			
	d accompanying documents re		•			
-	e agenda or distributed to the I	-				
-	ed that are not clear and concis					
		•	- 0			
•	Subject matter shall be limited to ten (10) minutes or as otherwise specified by the Mayor an Board of Aldermen during the course of the meeting.					
	e placed on the agenda in the o	0	er the appropriate heading.			
Upon the det	termination by the City Clerk egular meeting agenda, even if	that the agenda is full, add	ditional items will be placed			
	Aldermen reserve the right to					
	s are subject to change withou		y tem nom me ugenua.			
Accompanyi	ng Documents Attached?	yes	no			
Date:		Signed:				

(Person Making Request)