

SELECTMEN'S AGENDA REQUEST FORM

DATE OF REQUEST

REQUESTED AGENDA DATE

#1 AGENDA

Selectmen's Meetings are generally conducted on the 2nd and 4th Tuesday of each month unless otherwise posted, see website for more details. To be considered for inclusion, requests must be received by noon time on the Monday preceding the week of a meeting. Please provide a brief description of why you would like to be on the agenda. Give an explanation of what the reason is, the desired outcome of placing it on the Agenda, and any other pertinent information.

NOTE: Supporting documents are required for the agenda.

Questions regarding the agenda management can be directed to the Town Administrator via phone or email.

#2 NON-PUBLIC SESSION

Non-Public requires specific reason and must meet RSA 91-A:3 II (a) Dismissal, promotion or setting compensation for public employees or II (b) Consideration of hiring employees, or II (c) Matters which if discussed in public would likely affect adversely the reputation of any person unless such person requests an open meeting, or II (d) Consideration of the purchase, sale or lease of real or personal property which if discussed in public, would likely benefit a party or parties whose interests are adverse to those of the general community, or II (e) Discussion of pending or threatened (in writing) litigation against the Town or Town Officials, Board members or employees, or II (f) Consideration of applications by the adult parole board under RSA 651-A, or II (g) Consideration of applications by the business finance authority under RSA 162-A:7-10 and 162-A:13, or II (i) Consideration of matters relating to the preparation for the carrying out of emergency functions, or II (j) Consideration of confidential, commercial, or financial information that is exempt from public disclosure.

If your request is for a Non-Public Session, please state the reason and RSA letter (a,b,c,d,e,f,g,h,i,j)

Put on the Agenda only: #1 ____ OR Non-Public Session: #2 ____ RSA letter: _____

PRINT NAME

TEL. NUMBER

CELL PHONE

ADDRESS

TOWN, STATE, ZIP

SIGNATURE: _____