

**York Water District
Board Of Trustee
Agenda Item Request Form**

Please Fill Out And Return To The Superintendent

Name: _____ Date: _____

Physical Address: _____

Mailing Address: _____

Home Telephone Number: _____ Mobile Number: _____

Email: _____

Agenda item requested (Please Provide Background Information):

Below Is For Office Use Only

Received Date: ____/____/____ Received By: _____

Date Item Schuled On Agenda: ____/____/____