## REQUEST TO BE PLACED ON CITY OF OXFORD AGENDA

Please print or type.		Please submit one week prior to requested date.
TO:	Marcia Brooks City Clerk	City of Oxford 110 West Clark Street Oxford, GA 30054 (770) 786-7004
	'AFFILIATION: ESS	
AGEN	DA DATE CONFIRMATION	J:
LIST A		SSION WITH MOST IMPORTANT
WHAT	IS THE DESIRED OUTCON	ME/RESULT FROM THE COUNCIL?