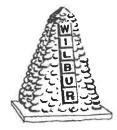
TOWN OF WILBUR CITIZEN COMMENT FORM



DATE:	-		
NAME:			
	ADDRESS:		
	JMBER:		
	F COMMENT:		
SIGNATUR	E OF CITIZEN		
WHO DO Y	OU WISH TO RESPOND TO THIS	?	
	SHERIFF'S DEPARTMENT		_ MAYOR/COUNCIL
	TOWN FOREMAN		TOWN CLERK/TREASURE
	NUISANCE DIRECTOR		
	DO YOU WISH TO HAVE THIS MEETING? (ATTENDANCE REPERSONNEL MATTERS ARE HA	QUIRED) PLE	ASE NOTE THAT ALL
DATE OF T	OWN'S RESPONSE:		
ACTION TA	AKEN:		
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