## **FANNIN COUNTY COMMISSIONERS COURT**

## **Public Participation Form**

DATE :	
NAME:	
ADDRESS:	
PHONE/CELL:	DAY PHONE:
	ticular group or organization?
If Yes, please state the na	me, address and telephone number of group or
Which agenda item(s) do you wish to address?	
	against above agenda item(s)?
Signature:	Print Name:
	rticipation Form must be presented to the prior to the beginning of this Court Session.
Thank you,	
Commissioners Court	

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