

# County Council Annual Meeting Date Submissions Form

**County name:** \_\_\_\_\_

**Day set aside:** \_\_\_\_\_

*Example: 2nd Tuesday of each month; or 4th Thursday, every other month*

**Meeting time:** \_\_\_\_\_

**Meeting location(s):**

(Place, address, city) \_\_\_\_\_

(Place, address, city) \_\_\_\_\_

**Contact name (admin. asst.):** \_\_\_\_\_

**Office phone (for more info):** \_\_\_\_\_

**2020 dates:**

*List any date or time changes or officers meetings to the right. Also indicate your annual meeting .*

Jan. \_\_\_\_\_

Feb. \_\_\_\_\_

March \_\_\_\_\_

April \_\_\_\_\_

May \_\_\_\_\_

June \_\_\_\_\_

July \_\_\_\_\_

Aug. \_\_\_\_\_

Sept. \_\_\_\_\_

Oct. \_\_\_\_\_

Nov. \_\_\_\_\_

Dec. \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_