

NOTICE: Sign and return this form (all pages) to the address listed above. The form must be received before the date of the proposed action is to be taken, or before the proposed action is taken, whichever is later. *(You may want to use certified mail, with return receipt requested. Make a copy of this form for your records.)*

CONSENT TO PROPOSED ACTIONS

☐ **I CONSENT** to the action proposed in the foregoing notice.

Date: _____
[Please print your name below]

[Type or Print Name] ☐ _____
[Signature of Consenter]

OBJECTION TO PROPOSED ACTION

☐ **I OBJECT** to the action proposed in the foregoing Notice.

Date: _____
[Please print your name below]

[Type or Print Name] ☐ _____
[Signature of Objector]

Approved as to Form

Approved as to Fiscal Provisions