

## **TOWN COUNCIL – AGENDA REQUEST FORM**

THIS FORM WILL BECOME PART OF THE BACKGROUND INFORMATION USED BY THE COUNCIL AND PUBLIC

Please submit Agenda Request Form, including back up information, <u>8 days prior</u> to the requested meeting date. <u>Public Hearing</u> requests must be submitted <u>20 days prior</u> to requested meeting date to meet publication deadlines (exceptions may be authorized by the Town Manager, Chairman/Vice Chair).

MEETING INFORMATION			
Date Submitted: December 9, 2020		Date of Meeting: December 17, 2020	
Submitted by: Sharon Marunicz, HR Coordinator			
Department: General Government		Time Required: 15 minu	tes
		Background Info.	Ma. 🗆
Speakers: Eileen (	Labanei	Supplied:	s: _\ No: _\
CATEGORY OF BUSINESS (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)			
Appointment:		Recognition/Resignation/	$\boxtimes$
		Retirement: Old Business:	
Public Hearing:	님		H
New Business:	片	Consent Agenda: Other:	
Nonpublic:			
TITLE OF ITEM			
Recognition of Retirement of Town Employee			
	DESCRIPTION	ON OF ITEM	
The Town Council will present a recognition award to Technology Coordinator William "Chuck" Miller in recognition of his retirement after more than 44 years of full time service to the Merrimack Police and General Government Departments: November 15, 1976 - December 31, 2020. Chuck worked full-time for the Merrimack Police Department for 21 years before retiring and accepting a position in the General Government Department. Chuck has opted for a gift card in lieu of the rocking chair engraved with the Town seal, name and dates of service.			
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	raved with the Town seal, name and dates	of service.  E (IF KNOWN)	
RSA:	raved with the Town seal, name and dates	of service.  E (IF KNOWN)  Warrant Article:	
RSA: Charter Article:	REFERENCE Employee Policy	warrant Article: Town Meeting: N/A	
RSA: Charter Article: Other:	Employee Policy Manual	warrant Article: Town Meeting: N/A	
RSA: Charter Article: Other: Projector:	Employee Policy Manual	of service.  E (IF KNOWN)  Warrant Article:  Town Meeting:  N/A  PLACE AN "X" IN THE APPROPRIATE BOX  Grant Requirements:	
RSA: Charter Article: Other: Projector: Easel:	Employee Policy Manual	of service.  E (IF KNOWN)  Warrant Article:  Town Meeting:  N/A  PLACE AN "X" IN THE APPROPRIATE BOX	
RSA: Charter Article: Other:  Projector: Easel: Special Seating:	Employee Policy Manual	of service.  E (IF KNOWN)  Warrant Article:  Town Meeting:  N/A  PLACE AN "X" IN THE APPROPRIATE BOX  Grant Requirements:  Joint Meeting:	
RSA: Charter Article: Other: Projector: Easel:	Employee Policy Manual	of service.  E (IF KNOWN)  Warrant Article:  Town Meeting:  N/A  PLACE AN "X" IN THE APPROPRIATE BOX  Grant Requirements:  Joint Meeting:  Other:  None:	
RSA: Charter Article: Other:  Projector: Easel: Special Seating:	Employee Policy Manual  EQUIPMENT REQUIRED (PLEASE F	of service.  E (IF KNOWN)  Warrant Article:  Town Meeting:  N/A  PLACE AN "X" IN THE APPROPRIATE BOX  Grant Requirements:  Joint Meeting:  Other:  None:	
RSA: Charter Article: Other:  Projector: Easel: Special Seating: Laptop:	Employee Policy Manual  EQUIPMENT REQUIRED (PLEASE F	of service.  E (IF KNOWN)  Warrant Article:  Town Meeting:  N/A  PLACE AN "X" IN THE APPROPRIATE BOX  Grant Requirements:  Joint Meeting:  Other:  None:  FORMATION	
RSA: Charter Article: Other:  Projector: Easel: Special Seating: Laptop:	Employee Policy Manual  EQUIPMENT REQUIRED (PLEASE F	Warrant Article: Town Meeting: N/A  PLACE AN "X" IN THE APPROPRIATE BOX Grant Requirements: Joint Meeting: Other: None: FORMATION Address Email	
RSA: Charter Article: Other:  Projector: Easel: Special Seating: Laptop:  Name:	Employee Policy Manual  EQUIPMENT REQUIRED (PLEASE F)  CONTACT IN	Warrant Article: Town Meeting: N/A  PLACE AN "X" IN THE APPROPRIATE BOX Grant Requirements: Joint Meeting: Other: None:  FORMATION Address Email Address smarunicz@r	)
RSA: Charter Article: Other:  Projector: Easel: Special Seating: Laptop:  Name:	Employee Policy Manual  EQUIPMENT REQUIRED (PLEASE F  CONTACT IN  Sharon Marunicz	Warrant Article: Town Meeting: N/A  PLACE AN "X" IN THE APPROPRIATE BOX Grant Requirements: Joint Meeting: Other: None:  FORMATION Address Email Address Smarunicz@r  OVAL  Chair/Vice Chair:	)