

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. **Public Hearing** 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: August 1, 2022 Submitted by: Sharon Marunicz, HR Director	Date of Meeting: August 18, 2022
Department: General Government Speakers: Lori Barrett, Operations Manager	Time Required: 15 minutes Background Info. Supplied: Yes: No:
CATEGORY OF BUSINESS (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)	
	Recognition/Resignation/
Appointment:	Retirement:
Public Hearing:	Old Business:
New Business:	Consent Agenda: Other:
Nonpublic:	
TITLE OF ITEM	
Recognition of Retirement of Town Employee	
DESCRIPT	ION OF ITEM
The Town Council will present a recognition award to Brian Friolet in recognition of his retirement from the Merrimack Public Works Department after more than 37 years of full time service to the Merrimack: May 6, 1985 - August 12, 2022. Employees with at least 30 years of service receive a Boston Rocking Chair with Town Seal upon retirement.	
REFERENCE (IF KNOWN)	
RSA:	Warrant Article:
Charter Article:	Town Meeting:
Other: Employee Policy Manual	N/A
EQUIPMENT REQUIRED (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)	
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Projector: EQUIPMENT REQUIRED (PLEAS	E PLACE AN "X" IN THE APPROPRIATE BOX) Grant Requirements:
Projector:	Grant Requirements:
Projector: Easel: Special Seating: Laptop:	Grant Requirements: Joint Meeting: Other: None:
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Projector: Easel: Special Seating: Laptop:	Grant Requirements: Joint Meeting: Other: None: INFORMATION Address 6 Baboosic Lake Road
Projector: Easel: Special Seating: Laptop: Contact I Name: Sharon Marunicz	Grant Requirements: Joint Meeting: Other: None: INFORMATION Address 6 Baboosic Lake Road Email
Projector: Easel: Special Seating: Laptop: CONTACT I Name: Sharon Marunicz Phone Number 603-424-2331	Grant Requirements: Joint Meeting: Other: None: None: INFORMATION Address Address Email Address Smarunicz@merrimacknh.gov
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