



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, 8 days prior to the requested meeting date. **Public Hearing requests must be submitted 20 days prior to requested meeting date to meet publication deadlines** (exceptions may be authorized by the Town Manager, Chairman/Vice Chair).

MEETING INFORMATION

Date Submitted: February 17, 2023	Date of Meeting: February 23, 2023
Submitted by: Technology Coordinator Jonathan Dias	Time Required: 15 minutes
Department: Information Technology	Background Info. Supplied: Yes: <input checked="" type="checkbox"/> No: <input type="checkbox"/>
Speakers: Jonathan Dias	

CATEGORY OF BUSINESS (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)

Appointment:	<input type="checkbox"/>	Recognition/Resignation/ Retirement:	<input type="checkbox"/>
Public Hearing:	<input type="checkbox"/>	Old Business:	<input type="checkbox"/>
New Business:	<input checked="" type="checkbox"/>	Consent Agenda:	<input type="checkbox"/>
Nonpublic:	<input type="checkbox"/>	Other:	<input type="checkbox"/>

TITLE OF ITEM

Dell Seed Program Participation Discussion

DESCRIPTION OF ITEM

The Town Council to consider participating in the Dell Seed Program, which allows the Town to test Dell’s newest devices and keep them in exchange for providing feedback. The estimated donation amount is \$1,500, pursuant to RSA 31:95-e and Charter Article 8-15.

REFERENCE (IF KNOWN)

RSA:	31:95-e	Warrant Article:	_____
Charter Article:	8-15	Town Meeting:	_____
Other:		N/A	

EQUIPMENT REQUIRED (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)

Projector:	<input type="checkbox"/>	Grant Requirements:	<input type="checkbox"/>
Easel:	<input type="checkbox"/>	Joint Meeting:	<input type="checkbox"/>
Special Seating:	<input type="checkbox"/>	Other:	<input type="checkbox"/>
Laptop:	<input type="checkbox"/>	None:	<input type="checkbox"/>

CONTACT INFORMATION

Name:	<u>Jonathan Dias</u>	Address:	<u>6 Baboosic Lake Road</u>
Phone Number:		Email Address:	<u>jdias@merrimacknh.gov</u>

APPROVAL

Town Manager:	Yes <input checked="" type="checkbox"/> No: <input type="checkbox"/>	Chair/Vice Chair:	Yes <input type="checkbox"/> No: <input type="checkbox"/>
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