

City of Sebastopol

CITIZEN COMMENT FORM

Please Check One:

COMMENT		COMPLAINT		COMMENDATION		
				-		
Date:						
Name:						
Residence Address:						
Business Address:						
Mailing Address:						
Residence Phone:						
Best Contact Phone Number:						
Email Address:						
				fIncident:		
Name or other Identification of City Employee (if appropriate):						
Other person(s) who should be contacted:						
Name:	Telephone:					
Address:						
Name:	Telephone:					
Address:						
REASON FOR COMMENT, COMPLAINT OR COMMENDATION Comments						
(Please be as specific as you can and use additional pages if necessary)						
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No. 1						
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			them to a spacif	in City Official place in	dicate who that	
We appreciate your comments. If you wish to direct them to a specific City Official, please indicate who that person is:						

7120 Bodega Avenue, Sebastopol, California 95472 Tel. 707. 823.1153 Fax. 707.823.1135 www.cityofsebastopol.org