

111 West Franklin Street Bloomfield, lowa 52537 Phone: (641)664-2260

Fax: (641)664-2445

## Please complete all GREEN areas. Attach additional sheets and appropriate documentation if required.

Date:	4-19-25	Agenda	Item #:	
From:	elect Dept	Тор	oic:	The second secon
Narrative: (Briefly describe the topic. Please include background information when appropriate.)				
3 phese under ground to lift Staition 1				
Desired Outcome: (Briefly describe the desired outcome, e.g., Council Action, Funds Appropriation, etc.)  Unduce grownel fown to hilt  Staition ## /				
Funding Requirement: (Indicate the anticipated funding requirement.)				
Amount:	\$ 30,000.00	Source of Funding:		
Submitting Member Contact Info:				
Name:	D. Hall	Email:		
Phone (H)	:	Phone (C):	641-2	08 -3381

NOTE: Agenda items should be transmitted through the City Clerk and should be submitted by EOD on Friday in advance of the following Thursday's City Council Meeting.