FY/13 SRB FORM-3 RESPONSES

TOWN	SUPPORT	NO SUPPORT	NO RESPONSE
Acton	X		
Ashland	X		
Auburn			X
Ayer	X	15 (15 (15 (15 (15 (15 (15 (15 (15 (15 (
Berlin			X
Billerica	X		
Blackstone	X		
Boxborough	X		
Chelmsford	X		
Clinton	<u> </u>		
Devens*		Boulever heaven verses and the second second	
Dracut	X	t and the second	
Fitchburg	X	A Control of the Cont	
Holliston	<u> </u>		X
Hopedale	X		
Hopkinton Hudson	X	Darojuvios savados vaidota	Contract the second second
	X		
Lancaster Leominster	X		
Littleton			
Lunenburg	<u></u>		X
Mariboro		X	A Company of the Comp
Milford	X		
Millbury	X		
Millville	X	And the first of the state of t	
Natick	X		
Northboro	X		
Northbridge	X		
Sherborn	X		
Shrewsbury			X
Southboro	X		
Stow	X		the state of the s
Sturbridge			X
Tewksbury	X		
Uxbridge			X
Webster			X
Westboro	X		
Westford		PORT THE STATE OF	<u> </u>
Wilmington	X		
TOTALS		1	

Rev. 3-4-10 Rev. 10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY 13

Declaration Here Libeday
the chief executive officer of Town/City of (Please Print) hereby designate to sign this declaration.
(Please check applicable box below)
Support Do Not Support
the preliminary mosquito control budget proposed and this municipality's estimated proportionate share thereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy.
Name: Doug Halley
Signature: (Please Print)
Position: Acelth Director
Date: $\frac{3/15/2012}{}$

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY 12.1.2

<u>Declaration</u>	
I, John Petren (Print Name/ and Sign Name)	the chief executive officer of Town/City of
hereby designate	to sign this declaration.
(Pri	nt Name)
(Please check applicable box below	v)
☐ Do Not Support	
thereof, expressed both as a perce	oudget proposed and this municipality's estimated proportionate share intage and as a dollar amount as provided to this municipality in compliance osquito Control Board Budget Notification and Compliance Certification
Name: Jo	no Potreu
Signature:	(Please Print)
Position: Town	managle
Date: April	2 12.2042





Town of Ayer BOARD OF HEALTH TOWN HALL

1 MAIN STREET AYER, MASSACHUSETTS 01432

Form SRB-3

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

<u>Page 1 of 1</u>

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3_

Declaration						
	ind Sign Name)	th		itive officer of 1	(Plea	ase Print)
hereby design	ate	(Print Name)			_to sign this d	leclaration.
(Please check	applicable box	below)				
□X Suppo	ort					
	ot Support	•				•
thereof, expre	ssed both as a Reclamation a	percentage and Mosquito	and as a dollar Control Board	amount as produced Budget Notifi	ovided to this cation and Co	d proportionate share municipality in complianc mpliance Certification
Name:	Kober	<u>-+ A</u>	. Fon	tbrian	nd_	
Signature:	Take	it A.	se Print	rind		
Position:	Town	Admir	nistra	tor		
Date:	4/3/	2012				

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY________

<u>Declaration</u>
1, John Coman flow On the chief executive officer of Town/City of Billenia
(Print Name/ and Sign Name) hereby designate Rich Berube to sign this declaration.
(Print Name)
(Please check applicable box below)
☐ Do Not Support
the preliminary mosquito control budget proposed and this municipality's estimated proportionate share thereof, expressed both as a percentage and as a dollar amount as provided to this municipality in complian with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification
Policy .
Name: Richard Berube
Signature: Suchard Dumbe
Position: Director of Public Health
Date: MArch 14 2012

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY 13

the chief executive officer of Town/City of (Please Print) (Print Name) (Print Name) (Print Name)
Please check applicable box below) Support Do Not Support
he preliminary mosquito control budget proposed and this municipality's estimated proportionate share hereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy.
Jame: William Tunkh
ignature: Ant Notel
osition: Chairman bagus of Health
ate: 4/10/12

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>Declaration</u>					
1, Raid M. Sole	iman Laco	Sull the chief ex	ecutive officer of To	wn/ City of Boxborough	<u> </u>
(Print Name/ and		•		(Please Print)	
hereby designat	e Selina	S. Shavy		to sign this declaration.	
		(Print Name)			
(Please check ap	plicable box l	pelow)			
▼ Support	t				
,	Support				
thereof, express	ed both as a p	ercentage and as a do	ollar amount as prov	y's estimated proportionate solided to this municipality in continuous and Compliance Certification	ompliance
Name:	Selina S	. Shaw	· 		
Signature:	alls	(Please Print)			
Position: I	SA NWO	ministrator			
Date:	1/12/12				

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY________

Declaration I, Paul C. (Print Name/a hereby design	the chief executive officer of Town/City of Che/msford (Please Print) and Sign Name) (Print Name) (Print Name)
(Please check	applicable box below)
M Suppo □ Do No	ort ot Support
thereof, expre	ry mosquito control budget proposed and this municipality's estimated proportionate share essed both as a percentage and as a dollar amount as provided to this municipality in compliance Reclamation and Mosquito Control Board Budget Notification and Compliance Certification
Name:	Richard J. Day
Signature:	Roll J- Day
Position:	Director of Public Health
Date:	April 3, 2012

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>Declaration</u>	1
1, Strue 1	the chief executive officer of Town/City of Clinton (Please Print)
hereby design	nate Structure BOH to sign this declaration. (Print Name)
(Please check	applicable box below)
Supp	ort
□ Do No	ot Support
thereof, expre	ry mosquito control budget proposed and this municipality's estimated proportionate share essed both as a percentage and as a dollar amount as provided to this municipality in compliance Reclamation and Mosquito Control Board Budget Notification and Compliance Certification
Name:	Strue Lipka
Signature:	St (Please Print)
Position:	CLAIRMAN SORIS of HEATE
Date:	4-9-12

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>Declaration</u>		1
	the chief executive office and Sign Name) Dean S E Pien SAU (Print Name)	r of Town/Gitter of Worker Of Town/Gitter of Town/Gitter of Worker Of Worker of Town/Gitter of T
∑ Supper Supper	applicable box below) ort ot Support	
thereof, expre	ry mosquito control budget proposed and this mun essed both as a percentage and as a dollar amount as Reclamation and Mosquito Control Board Budget N	as provided to this municipality in compliance
Name:	Dewnis E. Frendell	
Signature:	(Please Print)	
Position:	TOWN Managel	
Date:	3/16/12	

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

Declaration				
(Print Name/ and Sign Name)	3	nief executive officer o	(Plea	Fifehburg ase Print)
hereby designate	(Print Name)	-	to sign this d	eciaration.
(Please check applicable b	oox below)			
☐ Do Not Support				
with the State Reclamatio Policy .	s a percentage and a n and Mosquito Cor	as a dollar amount as	provided to this	municipality in compliance
Name:	A. Wong	1.0	·	
Signature:	(Please Pr	rint)	<u>.</u>	
Position: Ma	400			
Date: 3/21	112			

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

Declaration I, Norman Khumalo / the chief executive officer of Town/City of (Print Name/ and Sign Name)	Hopkinton, MA 01748
hereby designate Norman Khumale MARK GATES & to sign this	•
(Print Name)	
(Please check applicable box below)	
Support	
☐ Do Not Support	
the preliminary mosquito control budget proposed and this municipality's estimate thereof, expressed both as a percentage and as a dollar amount as provided to this with the State Reclamation and Mosquito Control Board Budget Notification and Copolicy.	s municipality in compliance
Name: MANYCH, GATES	
Signature: (Please Print)	
Position: BOARD OF HEALTH, CHAIRMAN	
Date: 190012 5,2012	

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY 13

<u>Declaration</u>				
I, MICHAE (Print Name/ and hereby designate	LE. COLLINS Sign Name) ELECNON (Print Name)	the chief executive offi	cer of Town/City of (Pleating to sign this d	ase Print)
(Please check ap	plicable box below)			
Support □ Do Not:				
thereof, expresse	ed both as a percentage	t proposed and this mu and as a dollar amount to Control Board Budget	as provided to this	municipality in compliance
Name:	Egoprol A	1220		·
Signature:	A Property of the state of the	egse Print)		
Position:/	YEAUT ASEN	T		•
Date:	3/27/02			

Rev. 3-4-10 Rev.10.27.10 Rev. 12,14.11

<u>Page 1 of 1</u>

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

I. James D	. Vereault	the chief executiv	e officer of Town/City of	Hudson
(Print Name/ ar	nd Sign Name)			use Print)
hereby designation	atePaul W.	Blazar	to sign this d	eclaration.
		(Print Name)		
(Please check a	applicable box bel	ow)		
Ğ Suppo	rt			
☐ Do No	t Support			
thereof, expres with the State	sed both as a per	centage and as a dollar ar	is municipality's estimated mount as provided to this ladget Notification and Cor	municipality in compliance
Policy .				•
Policy . Name:	Paul W. F	Blazar		
	Paul W. E	3lazar (Please Print)		
Name:	Mud			

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY_/3_

I, (Print Name) and Sign Na hereby designate	the chief executive offine) Pachelo (Print Name)	icer of Town/City of CONCESTORY (Please Print) to sign this declaration.
(Please check applicab	pie box below)	
✓ Support☐ Do Not Supp	ort	
thereof, expressed bot	th as a percentage and as a dollar amoun	unicipality's estimated proportionate share at as provided to this municipality in compliance to the Notification and Compliance Certification
Name:	rlando facheco	
Signature:	Mando Facility	
Position: <u>Tou</u>	un Administrator	
Date: 3-	16-12	

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY 13

<u>Declaration</u>	
I,	(Please Print) to sign this declaration.
	(Print Name)
(Please check applicable box b	low)
☑ Support☐ Do Not Support	
thereof, expressed both as a p	of budget proposed and this municipality's estimated proportionate share rcentage and as a dollar amount as provided to this municipality in compliance Mosquito Control Board Budget Notification and Compliance Certification
Name: Dear	J. Marzasella
Signature:	(Please Print)
Position: May	r
Date: 2 liv	12017

Rev. 3-4-10 Rev. 10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>eclaration</u>
the chief executive officer of Town/City of Littlebon Ma (Print Name/ and Sign Name) (Print Name) to sign this declaration. (Print Name)
lease check applicable box below)
☑ Support □ Do Not Support
ne preliminary mosquito control budget proposed and this municipality's estimated proportionate share nereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification olicy.
ame: Bonne Haston
gnature: (Please Print)
osition: Asst. Town Administrator France Director
ate:

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY______

Declaration		
(Print Name/ and Sign Name)		ease Print)
hereby designate(Print N	to sign this (declaration.
(Please check applicable box below)		
☐ Support		
Do Not Support		
thereof, expressed both as a percent	lget proposed and this municipality's estimate age and as a dollar amount as provided to this quito Control Board Budget Notification and Co	municipality in compliance
Name: Arthur Vige		
Signature:	(Please Print)	
Position: Mayor		
Date: 4/13/2012		

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY 2013

Doclaration

Leading Walder Congress

hereby designate (Print Name)	(Please Print)to sign this declaration.
,,	
(Please check applicable box below)	
Support Do Not Support	en de la composition de la composition La composition de la
the preliminary mosquito control budget proposed and this munic thereof, expressed both as a percentage and as a dollar amount as with the State Reclamation and Mosquito Control Board Budget No Policy.	s provided to this municipality in compliance
thereof, expressed both as a percentage and as a dollar amount as with the State Reclamation and Mosquito Control Board Budget No	s provided to this municipality in compliance
with the State Reclamation and Mosquito Control Board Budget No Policy . Name: Signature: Name: Name:	s provided to this municipality in compliance
thereof, expressed both as a percentage and as a dollar amount as with the State Reclamation and Mosquito Control Board Budget No Policy . Name: A 2 2 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	s provided to this municipality in compliance

communities' declarations to the State Reclamation and Mosquito Control Board no later than April 15th

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY________

I,the chief executive officer of Town/City of	
(Print Name/ and Sign Name) (Please Print)	
hereby designateto sign this declaration.	
(Print Name)	
(Please check applicable box below)	
'⊈ Support	
☐ Do Not Support	
the preliminary mosquito control budget proposed and this municipality's estimated proportionate sha thereof, expressed both as a percentage and as a dollar amount as provided to this municipality in com with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certificati	plianc
Policy . Name:	
Signature: Robert SPAIN	
Position: TOWN MANAGER	
Date: 3/29/12	

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

Declaration We, Board of Selectmen the chief executive of Town/City of MillVille
(Print Name/ and Sign Name) (Please Print) hereby designate Rolcind P. Barrett to sign this declaration. (Print Name)
(Please check applicable box below)
Support
☐ Do Not Support
the preliminary mosquito control budget proposed and this municipality's estimated proportionate share thereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy.
Name: Rolandi Barrett
Signature:
Position: Board of Selectmen - Chairman
Date: April 23, 2012

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY 2013

Peclaration Martin Martin Martin (Print Name/ and Sign Name) (Print Name) (Print Name) (Print Name) (Print Name) (Print Name)
Please check applicable box below)
☐ Support ☐ Do Not Support
he preliminary mosquito control budget proposed and this municipality's estimated proportionate share hereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance vith the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification olicy.
lame: JAMES M. WHITE, JR
ignature: AMAMAMAMATA
ate: April 9, 2012

Rev. 3-4-10 Rev. 10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>Declaration</u>			•	
(Print Name/	and Sign Name) nate ついしっ	the chief executive of the Colombia (Name)		ese Print)
	c applicable box below ort ot Support)		
thereof, expr	essed both as a percer	udget proposed and this ntage and as a dollar amo squito Control Board Bud	unt as provided to this	municipality in compliance
Name: Signature:	John h	(Please Print)		
Position:	Town A	- Inmetale		

Rev. 3-4-10 Rev. 10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY / 3

<u>Declaration</u>
I, Thomas J. Melia the chief executive officer of Town/City of Northbridge (Please Print) hereby designate Thomas J. Melia to sign this declaration. (Print Name)
(Please check applicable box below)
Support □ Do Not Support □ Do N
the preliminary mosquito control budget proposed and this municipality's estimated proportionate share thereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy.
Name: Thomas J. Melia
Signature: Thomas (Please Print) Police
Position: Chairman board of Selectmen
Date: 4-10-12

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>Declaration</u>			
ı, Jam	es P. Purcell	_the chief executive officer of Town/Cit	ty of <u>Sherborn</u>
(Print Name/ a	and Sign Name)		(Please Print)
hereby design			this declaration.
	(Print Nan	ne)	
(Please check	applicable box below)		
☑ Suppo	ort		
	ot Support		
thereof, expre	essed both as a percentage Reclamation and Mosqui	et proposed and this municipality's est e and as a dollar amount as provided t ito Control Board Budget Notification a	to this municipality in compliance
Name:	James P. Pi	urcell	
Signature:	James (legse Print /	
Position:	(Interim Tol	un Administrator	
Date:	3/26/12		

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>Declaration</u>			
THE BOALD OF SELECTMED the chief executive officer of Town/City of SouthBorough (Please Print)			
hereby designate WILLIAM J. BOLAND to sign this declaration. (Print Name)			
(Please check applicable box below)			
∑ Support			
☐ Do Not Support			
the preliminary mosquito control budget proposed and this municipality's estimated proportionate share thereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy .			
Name: WILLIAM J. BOLAND			
Signature: (Please Print)			
Position: CHAILMAN BOARD OF SELECTONEN			
Date: 4PCIL 23, 2012			

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY $/ \mathcal{S}$

Declaration	
1. WILLIAM WRIGLEY	the chief executive officer of Town/City of
(Print Name/ and Sign Name)	(Please Print)
hereby designate	to sign this declaration.
(Print I	name)
(Please check applicable box below)	
Support	
☐ Do Not Support	
thereof, expressed both as a percent	dget proposed and this municipality's estimated proportionate share age and as a dollar amount as provided to this municipality in compliance quito Control Board Budget Notification and Compliance Certification
Name: Wllam	100 marches
Signature: Willam T.	(Please Print) WR16159
Position: Town ADMIN	NISTRATER.
Date: 4/9/1	2

Rev. 3-4-10 Rev. 10.27.10 Rev. 12.14.11

Page 1 of 1

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY /3

<u>Declaration</u>
(Print Name) the chief executive officer of Town/City of Franks Grint) (Please Print) (Print Name) to sign this declaration. (Print Name)
(Please check applicable box below)
Support Do Not Support
the preliminary mosquito control budget proposed and this municipality's estimated proportionate share thereof, expressed both as a percentage and as a dollar amount as provided to this municipality in compliance with the State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy.
Name: Bichard A. Mostuad
Signature: (Please Print)
Position: Town Manager
Date: 3/24//Z

Rev. 3-4-10 Rev.10.27.10 Rev. 12.14.11

<u>Page 1 of 1</u>

State Reclamation and Mosquito Control Board Budget Notification and Compliance Certification Policy

DECLARATION OF SUPPORT OR NO SUPPORT OF MOSQUITO CONTROL FUNDING FOR FY________

<u>Declaration</u>	
I, <u>Michael</u> (Print Namel ar hereby designa	nd Sign Name) (Please Print)
(Please check a	applicable box below)
	ort et Support
thereof, expres	y mosquito control budget proposed and this municipality's estimated proportionate share ssed both as a percentage and as a dollar amount as provided to this municipality in compliance Reclamation and Mosquito Control Board Budget Notification and Compliance Certification
Name:	Sherry Newhouse
Signature:	Sully new howse
Position:	DIRECTOR OF PUBLIC Hearth
Date:	3-22-12