



CITY OF DONALD

10710 Main Street N.E. • P.O. Box 388 • Donald, OR 97020-0388

Phone 503-678-5543 • Fax 503-678-2750

www.donaldoregon.gov

FEEDBACK FORM

Please check one item below and add comments in space provided.

☐ Complaint

☐ Suggestion

☐ Feedback

☐ Give recognition

☐ Safety alerts

☐ Other

Please note: Feedback Forms must be received by the first Tuesday of the month in order to be read into the record at that month's City Council Meeting. Council may choose not to make a decision or decide on a course of action. Council may choose to look into the matter further and provide a response in the future. The Donald City Council meets on the second Tuesday of the month at 6:45 pm.

In the event a complaint results in a citation being issued for Code violation(s), please understand that you may be subpoenaed to appear as a witness in Donald Municipal Court.

Comments:

Optional Information

Would you like to receive follow-up? Yes ☐ No ☐

How would you like to be contacted: Phone ☐ Mail ☐ Email ☐

Name: _____ Date: _____

Address: _____ Phone: _____

Email: _____

OFFICE USE ONLY

Date Received: _____ Date Read at Council Meeting: _____

Action Taken: _____

Follow-up with person submitting form? ☐ Yes ☐ No

Resolved: ☐ Yes ☐ No