This form has been designed to provide valuable input to the Grays Harbor 4-H program. Once completed, this form will be distributed to the appropriate individual or group to address the issue or concern. Please take a few moments and complete all three sections of this form and sign it. **Forms without all three sections completed and a signature will be disregarded.**

SECTION #1: Describe the current situation:

________________________________________________________________________

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SECTION #2: Describe the problem with the current situation:

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OVER
SECTION #3: Give your suggestion(s) for a possible solution:

________________________________________________________________________

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Please Print:

Name of person completing form: ________________________________

Address of person completing form: ________________________________

Phone number of person completing form: __________________________

E-mail address of person completing form: __________________________

Signed: ________________________________

Dated: ________________________________

Please return completed forms to:

GRAYS HARBOR 4-H
PO Box 3018
Elma, WA 98541