

CITIZEN FEEDBACK FORM
TOWN OF NEW BOSTON, NH

Date: _____

Name: _____

Phone # _____

Email _____

Feedback Detail:

Action Taken:

Town Administrator
Comments/Signature:

Please either drop this form off at the Town Hall, 7 Meetinghouse Hill Road, during regular business hours or mail to Town of New Boston, PO Box 250, New Boston, NH 03070