DOLLARS FOR $ENSE

NAME	DEPARTMENT/WORK ADDRESS
E-MAIL ADDRESS	PHONE EXT.
NAME OF SUPERVISOR	SUPERVISOR'S PHONE EXT.

DESCRIBE YOUR SUGGESTION:

Describe any dollar savings, improvements to safety, morale, service to the public, increases in productivity, etc.

Please include any documentation that will assist the Committee in evaluating your suggestion, including: pictures, charts, etc., as needed to illustrate and explain. Support statements from supervisors or co-workers may also be included.

SUGGESTER'S SIGNATURE _____ DATE _____