## **VERIFICATION CHECK LIST**

## APPOINTED and/or ELECTED VILLAGE COUNCIL MEMBERS

By my signature below, I verify I have received a copy of and reviewed the following information deemed necessary to fulfill my duties as a member of the Village Council of Port Sanilac:

1.	Code of Conduct		
2.	Michigan Planning Enabling	Act 33	
3.	Michigan Open Meetings Ac	t 267	
4.	Michigan Freedom of Inform	ation Act 442	
my use and th		are available on the Port Sanilac Village website are to me upon request. (Updates to the ordinances ally approved and adopted.)	
Signature		Date	
Print Name		_	
OR ·			
I refuse to sig	gn; Signature	Date	
*****	**********	*****************	
Accepted by_			
	Signature of Village Clerk	Date	