



# JULIE Member Area of Notification Request Form

Company Name: \_\_\_\_\_ Member Code: \_\_\_\_\_

County: \_\_\_\_\_ Tier # Range #: \_\_\_\_\_

Section/Quarter-Section Grid Selections

Add / Remove (circle one): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City/Township Place Selection

\_\_\_\_\_  
\_\_\_\_\_

County: \_\_\_\_\_ Tier # Range #: \_\_\_\_\_

Section/Quarter-Section Grid Selections

Add / Remove (circle one): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City/Township Place Selection

\_\_\_\_\_  
\_\_\_\_\_

**Coordinator  
Signature:**

