

Dexter Township
 6880 Dexter Pinckney Road
 Dexter MI 48130
 734-426-3767 Phone
 clerk@dextertownshipmi.gov

Notice of Solicitation/Canvass

Company: _____

Address: _____

Phone Number: _____

Start Date: _____

End Date: _____

Reason: _____

Employee Information

Last Name	First Name	Address	City	Start Date	D.O.B	Drivers License #

Vehicle Information

Model	Make	Color	License Plate	VIN

***Attach Copy of Drivers Licenses**