

**Department of Public Health**

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Public Health Administrator

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**City of Racine, Wisconsin**

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May 14, 2015

Honorable Mayor and Members of the Common Council  
City of Racine  
Racine City Hall  
730 Washington Avenue  
Racine, WI 53403

Dear Mayor and Council Members:

I hereby request permission for the Mayor and City Clerk to enter into an agreement with MH Imaging, LLC in which they would provide specified medical imaging services at no charge to qualified TB clients through the City of Racine Health Department.

The term of this agreement shall be for one (1) year from the date of acceptance by the City of Racine.

There is no City match required.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "D Bowersox", is written over the typed name.

Dottie-Kay Bowersox  
Public Health Administrator