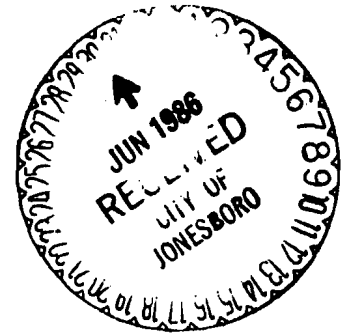




*send to attach
not agenda
X send questionnaire
back.*



June 26, 1986

Dear Mayor,

The Arkansas Needs Seatbelts is a nonprofit organization working to educate the public about the effectiveness of safety belts as a life saving device in automobile accidents. The coalition is also building grass-roots support for a mandatory safety belt use law for Arkansas.

It is estimated that safety belt use can decrease deaths and incapacitating injuries by 50%. In Arkansas alone, that means we would save almost 190 lives a year. As you may be aware, twenty-six states and the District of Columbia have already passed mandatory safety belt laws and every state with the law in force has seen a decrease in injuries and fatalities.

We are asking your city to take a stand on this worthwhile issue. Please agenda this matter at an upcoming meeting, and consider passing a resolution endorsing a mandatory safety belt use law for Arkansas. If you need any further information prior to the meeting, please do not hesitate to call me.

The Coalition is also surveying cities and counties in Arkansas to determine if they have a safety belt use policy. Please respond to the enclosed questionnaire, and also supply a copy of your resolution when passed.

If you do not plan to consider a resolution endorsing a mandatory safety belt use law for Arkansas, I would appreciate your notifying me of that decision as well.

Thank you for your consideration of this extremely important issue. I look forward to hearing from you soon.

Sincerely,

Lydia Robertson
Executive Director

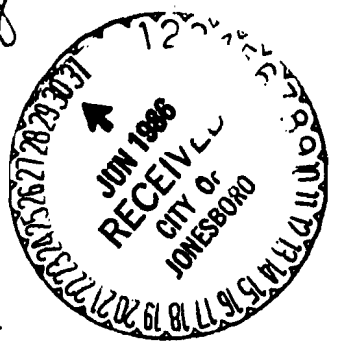
LR/gd

Enc.

1005 West 6th, Suite C, Little Rock, AR 72201 (501) 374-1289

City and County Questionnaire-Safety Belt Policy

copy



1. Does your city/county have a safety belt use policy?
Yes _____ No

2. How was your action adopted?
____ Action by City/County Administrator.
____ Official action by the city/county commission.
____ Other. (please explain) _____

3. Was there a specific citizen group or organization that requested your policy? Yes ___ No ___ If yes, please explain: _____

4. Explain briefly the provisions of your policy (please supply a copy of your written policy) _____

5. Does the policy provide any incentives for those buckling up?
Yes ___ No ___ If yes, please explain the incentives: _____

6. Who administers this policy? Name: _____
Title: _____
Address: _____

Phone: () _____

7. Would safety belt bumper stickers and dashboard stickers be helpful to you in enforcing your policy? Yes ___ No ___

8. Please supply any additional information you would like to add:

Mail to: Lydia Robertson
Arkansas Needs Seatbelts
1005 W. 6th Street, Suite C
Little Rock, AR 72201

If you have questions please call: (501) 374-1289.

Name of city/county: JONESBORO / CRA: 9/15/88

*I plan to present this resolution to the council at the next meeting.
Neil & Stallings - Mayor*