

COMMISSION AND COMMITTEE APPLICATION

(Please print legibly or type)

CITY HALL 222 NE Old Salem	Commission and/or Committee Preference:					
Ubany, OR 97321 yofmillersburg.org (458) 233-6300	(list all for which you are applying)					
Name:	Preferred First Name:					
	Residential Information:					
Home Address:	Phone:					
	Cellular:					
E-mail:	 Fax:					
		(Optional)				
	Employment Information:					
Employer's Name:						
Work Address:	Dhone					
	Cellular:					
E-mail:	Fax:					
		(Ontional)				

Please provide information as requested below to describe your qualifications to serve on this City of Millersburg Commission or Committee. Feel free to provide additional information you wish to share with the City.

• List current or most recent occupation, business, trade, or profession:

•	List community/civic activities. Indicate activities in which you are or have been active:
•	Indicate why you are interested in serving on this commission or committee and what other qualifications apply to this position.
•	What contributions do you hope to make?
DI	
	ase consult the <i>Guide for Public Officials</i> and the <i>Guide for Public Officials 2015 Supplement</i> that are posted the state of Oregon's website at http://www.oregon.gov/ogec/Pages/index.aspx (see visual reference below)
G	uide for Public Officials
	The guide has been revised to include informational links to statutes and rules to give you a more complete reference tool. Click here to access the guide. Click here for Guide for Public Officials 2015 Supplement.
	Signature of Applicant Date



COMMISSION / COMMITTEE SUPPLEMENTAL FORM

Your Name							
Commission / Committee Name							
commissions and committees. Und addresses and telephone numbers are To help City staff members, could y	der Oregon law, e generally exem- ou please check	as a publi pt from pub "yes," "no,	" or "not applicable" below as to whether				
or not you authorize this information	being available	to the publ	ic:				
Home Address	Yes	No	Not Applicable				
Home Telephone Number	Yes	No	Not Applicable				
Home Fax Number	Yes	No	Not Applicable				
Personal Cell Number	Yes	No	Not Applicable				
Home E-mail Address	Yes	No	Not Applicable				
Work Address	Yes	No	Not Applicable				
Work Telephone Number	Yes	No	Not Applicable				
Work Fax Number Work	Yes	No	Not Applicable				
Cell Number	Yes	No	Not Applicable				
Work E-mail Address	Yes	No	Not Applicable				
 send a letter to you c/o the 0 the City will forward it to you 	icate with you, the City Recorder, 42 ou; or	ne City will 222 NE Old	will be released. If you have chosen "no' I suggest that s/he either: d Salem Road, Albany, OR 97321; then Recorder who will then give the message				
to you. Signature			Date				