

APPLICATION FOR APPOINTMENT TO BOARDS AND COMMISSIONS

Board or Comr	nission Name:				
Name:(Last)		(First)		(Middle)
`	,		, ,		(Middle)
Mailing Addr	ress:				(Zip)
Daytime Pho	ne:		Alter	nate Phone:	
Employer:			Busin	ness Phone:	
Occupation/P	osition:		Fax l	Number:	
e-mail Addres	SS:				
 In whice Are you Are you Are you \$ 8-16-4 registere (A) rece (B) rece (C) exp (D) lob (1) (2) (3) 	h geographic area of a registered voter? a City of Buda residence of the City Code requested lobbyist: eives compensation of the eives reimbursement of the series as the agent or empreceives compensation receives reimbursement expends \$200 or more in a series as the agent or empreceives compensation receives reimbursement expends \$200 or more expends \$200 or mor	Buda do you resid "Yes "N dent? "Yes the last three years ires a person meetin \$200 or more in a ca a calendar quarter for ployee of a person y n of \$200 or more in nt of \$200 or more in e in a calendar quarter e in a calendar quarter	oups as well le? No No s registered/s g the following the following allendar quarter lobbying; or who: a calendar quarter a calendar quarter for lobbying the following the following the for lobbying the	worked as a city lobbing criteria to register wer for lobbying; ter to lobbying; truarter for lobbying; quarter for lobbying; g.	oyist?
•	or your employer ha	•	ealings with	the City of Buda that	t might present a
	of interest? Yes				
J	izing that serving on			Ç.	are you committed
to atten	ding all regularly sch	leduled meetings?	⊔ Y es	\square No	

 Do you agree to 	o complete any training	necessary for the Board or C	Commission to which you are
applying? □	Yes □ No		
Describe any qualific any elaborations of ye		pecial interests that relate to	your possible appointment, and
It is suggested you sub of Buda City Clerk for		esume with your application.	Please return the original to the City

*** ADA COMPLIANCE ***

Your application, which is public information under the Texas Open Records Act, will be kept on file for

twelve (12) months.

Reasonable accommodations and equal access to communication are provided upon request.

Return to: City Manager P.O. Box 1218, Buda, Texas 78610 Phone: (512) 295-6331 Fax: (512) 312-1889

e-mail tmilam@ci.buda.tx.us