

Return completed application to:

City Clerk's Office 1887 Howard Street Anderson, CA 96007 Phone: 378-6646

Fax: 378-6648

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(Please Print)		
Personal Information		
Name		
Home Address		
Home Telephone No Business Telephone No		
Fax No email		
Occupation		
Name of Business		
Business Address		
Statement of Interest		
City of Anderson Commission(s) for which you would like to be considered:		
Please describe your interest in serving on this Commission:		
Please describe your qualifications:		
(Please continue on reverse side)		

Continued from previous page	
References	
Please include Personal or B	susiness References.
Name:	
	Phone Number:
Name	
Name:Affiliation/Business:	
Name:	
	Phone Number:
Signature	Date