

I am interested in continuing to serve on the following board/commission.

Board of Equalization			
As an applicant/member of a Council-appointed Board or Commission, your name, address, and phone number will be available to the press and public. Information will be kept on file for three years. Public discussion of information contained herein may occur in the meeting at which appointments are considered by the City Council.			
□Mr. □Mrs. □Ms. □Miss. ☑Dr.			(Please type or print clearly)
Name: Coulter (Last)	Phyllis (First)	Y (M.I)	Date: November 9, 2016
Home Address: 475 Ott Street, Harrisonburg, VA			<b>Zip Code</b> : 22801
Phone Number: 540-434-6874 Alternate Phone: 804		te Phone: <u>804</u> -	658-7292
Occupation: Retired University Professor Employer/Organization: Eastern Mennonite University			
E-mail: coulterp@comcast.net Harrisonburg resident for _50_ year			onburg resident for <u>50</u> years.
How many years have you served:1 How many terms have you served:1			

## **Additional comments:**

I appreciate your faith in my abilities to serve on the Board of Equalization for another year. My work on the Board last year was informative and enlightening and gave me the opportunity to use my knowledge gained from studying with the VA Department of Taxation. I look forward to continuing to serve the residents of Harrisonburg with a fair-minded, honest, and knowledgeable approach to responding to their petitions. Thank you to our public servants who provide an immeasurable amount of expertise and support.