Boards & Commissions Reappointment Application



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

Transportation Safety Advisory Commission

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	. DMiss. DDr.	(Please type or print clearly)
Name: Blessing (Last)	William (First)	E
Home Address: 1120) Meadowlark Drive, Harrisonburg, V.	A Zip Code: 22802
Phone Number: 540)-433-9957 Alte	rnate Phone: 540-476-2168
Occupation: P/T wo	odworker/carpenter Employer/C	Organization: Camp Horizons
E-mail: webarb@con	mcast.net	Harrisonburg resident for 23 years.
How many years ha	ve you served: 21 Ho	ow many terms have you served:7

Additional comments: