



Boards & Commissions Reappointment Application

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

Ecomonic Development Authority

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

			tion cont y Counc		l herein may occu	r in the me	eeting at w	which appointments are
Mr.	Mrs.	Ms.	Miss.	Dr.				(Please type or print clearly)
Name:	Chewnir Last)	ng			R. (First)	Bradley	(M.I)	Date: Feb. 24, 2020
`	. ,	1832	College A	∖ve.	Harrisonburg, VA			Zip Code : 22802
Phone Number: 540-434-3913					Alternate Phone: 540-435-4809			
Occupation: Retired Employer/Organization:								
E-mail: rbchewning@gmail.com Harrisonburg resident for 47 years.								
How many years have you served: 12 How many terms have you served: 3								ve you served: 3
Additio	nal com	ments	•					

R. Bradley Chewning



