

CITY OF ANGELS

APPLICATION FOR PLANNING COMMISSION APPOINTMENT

Name: CLAVE	Y WENDT			
Address: _	4			
Phone Number:	Address: _	, -		
Years of Residency in Ange	els Camp? 20 Re	gistered Voter? Y	res_X No	
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From a City Planning asp		oes the City need	to improve on the 1	most?
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