Board or Commission:	Harbon	Completion
----------------------	--------	------------

I, Steven Danuari Name (please print)	0		
Street Address		Apt #	
Courstal	BI	0289	
City/Town	State	Zip Code	
Mailing Address (if different than above)		Apt#	
City/Town	State	Zip Code	
Primary Phone: Alternate Phone: Email Address:			
CT /			
Ŭ do			
do not			
wish to be considered for reappointmen	t to the abov	ve-mentioned Board or Commission 2 / 14 / 2025	.•
		Date Signed	