

Board or Commission: Weymouth Trust

I, Starr E. Johnson,
Name (please print)

345 channel View 101
Street Address **Apt #**

Wauwick RI 02886
City/Town **State** **Zip Code**

Mailing Address (if different than above) **Apt #**

City/Town **State** **Zip Code**

Print

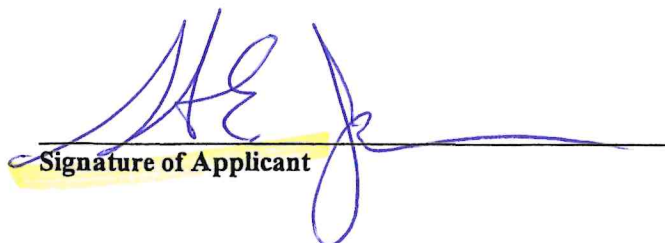
Alt:

Em:

☒ do

☐ do not

wish to be considered for reappointment to the above-mentioned Board or Commission.


Signature of Applicant

3/12/25
Date Signed