



Name: \_\_\_\_\_  
(Please print)

Home Address: \_\_\_\_\_  
Street Address City State Zip

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

1. Office sought: City Commissioner- Appointed – Term ending December 2026

2. Are you a City of Buchanan resident?  
(MCL 168.342) YES NO

3. Are you a registered voter in the City of Buchanan?  
(MCL 168.342) YES NO

4. Are you presently delinquent or default on property taxes and/or  
special assessments or city owned utility owed to the city?  
(City Charter Section 5.1) YES NO

5. Have you been convicted of a felony?  
(MCL 168.342) YES NO

6. Have you been a Resident of the City of Buchanan  
for 2 years or more?  
(City Charter Section 5.1) YES NO

7. Do you agree to abide by the City's Code of Conduct and  
Ethics Ordinance  
(City Ordinance Article V. Section 2-131) YES NO

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





- 6) Help us understand the type of leader you will be by describing your highest priorities for the City of Buchanan--both in the short term and in the long term.
  
  - 7) Please provide a list of previous leadership positions you have held and the role you played in each.
  
  - 8) Optional: Please feel free to share additional information such as a resume or any other pertinent information.
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