CITY OF LAKE CITY, FLORIDA CITY BOARD/COMMITTEE APPLICATION

Dear Applicant:

Thank you for your interest in serving the City of Lake City as a member of a "Citizen" board or committee. We appreciate your willingness to help our elected and appointed officials shape the future of Lake City.

Please note, the City of Lake City is subject disclosure absent any applicable exemptions.	to FS 119, therefore this applic	ation is subject to
Janua	Colonson	
First Name	Last Name	Middle Initial
508 WE Davis AVL		
Home Address		
Lake by 5	₹. 3205 State	5
City	State	Zip
386-628-7689 386-628-	7689 Bookinson ac	13@ 9mail. 600
Phone Number	Cell#	Email
Beautification Advisory Committee Community Redevelopment Advisory Co Utility Advisory Committee Planning and Zoning Board Board of Trustees – Municipal Firefighte Board of Trustees – General City Employ Board of Trustees – Lake City Municipal	rs Pension Trust Fund yees Retirement Plan	⁼ und
Charter Review		
Other:		
Please indicate any certifications, skills, or expense your service on a Board or Committee.	erience that you feel will benefit the	City through
		