City Recorder's Office
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Lebanon, OR 97355
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city.recorder@lebanonoregon.gov
www.lebanonoregon.gov

APPLICATION FOR BOARD / COMMITTEE / COMMISSION

Applicant Information (Please type/print clearly):

Name: Tom Wells		Date: 05/01/2024
Home Address: [redacted]		
Mailing Address: Same		
Home Phone: [redacted]	Email Address: [redacted]	Business Phone:
Occupation: Retired	Employer:	Emergency Contact Phone:

Preferred method of contact: ☐ Mail ☒ Phone ☒ Email

Please mark which one you are interested in serving on:

☐ *Ad Hoc Committee* _____ ☐ *Non-Election Council Vacancy*
(Print the Ad Hoc Committee Name)

☒ *Budget Committee* ☐ *Library Advisory Committee* ☐ *Parks, Trees & Trails Advisory Committee*
(Must be Registered Voter)

☐ *Planning Commission* ☐ *Senior & Disabled Services Advisory Committee*

Are you applying for reappointment: ☒ *Yes* ☐ *No* If so, how long did you serve in this capacity: 4 *Year(s)* ___ *Month(s)*

Describe experience related to position applying for:
Currently a member of this committee

List current and/or previous involvement on any government boards/committees/commissions/councils:
Linn County Expo Advisory Committee

Explain why you are interested in serving in this capacity (attach additional sheet if needed):
I am especially interested in how the current and upcoming deficits are going to be dealt with.

Applicant's Signature: [redacted] Date: 5/1/2024

FOR OFFICE USE ONLY

DATE RECEIVED: ___/___/___	*City Council Appointment Date:* ___/___/___
DATE SENT TO:	*Applicant Notification Date:* ___/___/___
Director: ___/___/___ *Mayor:* ___/___/___	*Term Start Date:* ___/___/___
Applicant Appointed: ☐ *Yes* ☐ *No*	*Term End Date:* ___/___/___

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