



**CITY OF FERNDALE
TBD Ballot Measure “For” and “Against” Committee
APPLICATION**

- As a candidate to a public board or committee, this information may be made available to the public.
- Return this completed application to the City Clerk’s Office.

Select One:

I would like to serve on the committee “For” the TBD Ballot Measure.

I would like to serve on the committee “Against” the TBD Ballot Measure.

Name: _____

Street Address: _____

Mailing Address (if different): _____

Phone Numbers: Home: _____ Cell: _____ Work: _____

Email: _____

Occupation: *(if retired, state former occupation)* _____

Professional/Community Activities: _____

Why are you interested in serving on this Committee?

What is the best method for contacting you? _____

I hereby affirm that the above information is true and correct.

Signature: _____

Date: _____