

DATE: April 03, 2018

TO: City Clerk

FROM: City Representative Michiel Noe

ADDRESS: 300 N. Campbell Street TELEPHONE 915-212-0005

Please place the following item on the (Check one): CONSENT XXX REGULAR _____

Agenda for the Council Meeting of April 03, 2018

Item should read as follows: Re- appointment of Don Luciano to the Historic Landmark Commission

BOARD COMMITTEE/COMMISSION APPOINTMENT/REAPPOINTMENT FORM

NAME OF BOARD/COMMITTEE/COMMISSION: Historic Landmark Commission

NOMINATED BY: Representative Michiel Noe DISTRICT: 5

NAME OF APPOINTEE Don Luciano
(Please verify correct spelling of name)

E-MAIL ADDRESS: _____

BUSINESS ADDRESS: _____

CITY: HOME ST: _____ ZIP: _____ PHONE: _____

ADDRESS: CITY: _____

_____ ST: _____ ZIP: _____ PHONE: _____

DOES THE PROPOSED APPOINTEE HAVE A RELATIVE WORKING FOR THE CITY? YES: ____ NO X

IF SO, PLEASE PROVIDE HIS OR HER NAME, CITY POSITION AND RELATIONSHIP TO THE PROPOSED APPOINTEE:

HAS APPOINTEE BEEN A MEMBER OF OTHER CITY BOARDS/COMMISSIONS/COMMITTEES? IF SO, PLEASE PROVIDE NAMES AND DATE:

WHO WAS THE LAST PERSON TO HAVE HELD THIS POSITION BEFORE IT BECAME VACANT?

NAME OF INCUMBENT: Don Luciano
03-12-2018

EXPIRATION DATE OF INCUMBENT: _____

REASON PERSON IS NO LONGER IN OFFICE (CHECK ONE): TERM EXPIRED: _____
RESIGNED _____
REMOVED _____

DATE OF APPOINTMENT: April 03, 2018

TERM BEGINS ON : March 13, 2018

EXPIRATION DATE OF NEW APPOINTEE: March 12, 2020

PLEASE CHECK ONE OF THE FOLLOWING: 1st TERM: _____

2nd TERM: X

UNEXPIRED TERM: _____