

DATE: 7/15/2014

TO: City Clerk

FROM: Mayor Oscar Leeser

ADDRESS: 300 N. Campbell, 2nd Floor TELEPHONE 212-0021

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

Agenda for the Council Meeting of 7/21/2015

Re-appointment of Carl Robinson as a regular appointee to the Financial and Audit Oversight

Item should read as follows: Committee

BOARD COMMITTEE/COMMISSION APPOINTMENT/REAPPOINTMENT FORM

NAME OF BOARD/COMMITTEE/COMMISSION: Financial and Audit Oversight Committee

NOMINATED BY: Oscar Leeser DISTRICT: Mayor

NAME OF APPOINTEE Carl Robinson
(Please verify correct spelling of name)

E-MAIL ADDRESS: _____

BUSINESS ADDRESS: _____

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

HOME ADDRESS: _____

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

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

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

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

X

NAME OF INCUMBENT: Carl Robinson

EXPIRATION DATE OF INCUMBENT: _____

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

DATE OF APPOINTMENT: 7/21/2015

TERM BEGINS ON : 7/21/2015

EXPIRATION DATE OF NEW APPOINTEE: _____

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

2nd TERM: _____

UNEXPIRED TERM: _____