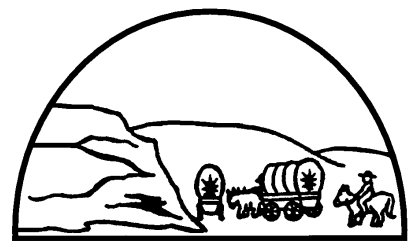


CITY OF PILOT ROCK
Budget Committee Application
SEPTEMBER 2018



APPLICATION FORM

Name of Applicant _____

Address: _____

Phone number: _____

Email: _____

1. Why do you want to become a member of the Budget Committee?

2. What ideas do you have that would enhance the Committee?

3. How long have you lived in the City of Pilot Rock?

4. What City services do you currently make use of?

5. If appointed, what would be the best time for meetings for you?

Signature: _____ Date: _____