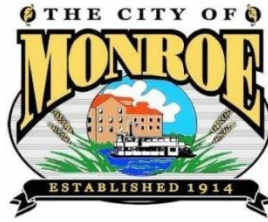


664 Commercial Street
Monroe, Oregon 97456



Phone: 541-847-5175
Fax: 541-847-5177
cityhall@monroeoregon.gov

BUDGET COMMITTEE APPLICATION FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Budget Committee Requirements

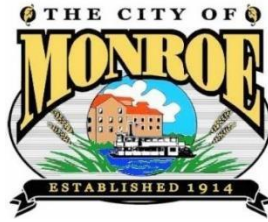
- Be a City of Monroe resident who has lived within city limits for a minimum of one-year prior to appointment.
- Commit to a 4-year term. Expect a time commitment of 4 meetings between March 1 and June 30 on even years and 2 meetings between March 1 and April 30 on odd years. The City has a biennial budget.

I meet the requirements and can commit to a four year term

Tell us why you would like to be included on the Budget Committee and what you will contribute:

Please list any education, prior experience, volunteering opportunities, or any other information that would indicate how you would contribute to the Committee.

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BUDGET COMMITTEE APPLICATION (CONTINUED)

Please list a personal/professional reference that we may contact:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Relation to you: _____

By providing your signature below, you acknowledge that you are the applicant for the Budget Committee position and authorize the City to contact your reference provided. In addition, you have read and understand the expectations as a Budget Committee Member.

If signed electronically by typing my name below, I understand and agree that this form of electronic signature has the same legal force and effect as a manual signature.

Signature: _____ Date: _____

Applications may be mailed or dropped off to Monroe City Hall, 664 Commercial St., Monroe, OR 97456 or send via email to cityhall@monroeoregon.gov