CITY OF OCALA

BOARD AND COMMISSION APPLICATION

Name: Fichard Howard Sr	Home Phone: 352-895-3354
Home Address: 4900 S. W 46 CT APT	2802
City, State, Zip Code: DCAIAFL 34474	34474
Business: WEWST MANY MBCHUNCH	Business Phone: 352 622-980 9
Business Address: 4491 Nw 27AVE	= I
Occupation: PASTON	Email Address: PASTONHOWANDED @ Y
Brief Resume of Education and Experience:	,
Are you a Resident of Marion County? (If so, state length of time)	Yes No No Number of Years:
Do you own property within the City limits?	Yes No O
Do you reside within the City?	Yes No O
Do you own a business within the City?	Yes No O
Are you a registered City voter?	Yes No O
Do you hold a public office?	Yes No O
Are you employed by the City?	Yes No D
At the present time, do you serve on a City Board, Commission, Authority, or Committee?	Yes No O
Please Note: A board/commission member shall not serve on more than one City board/commission at a time, unless that board/commission is an interim Ad Hoc Committee. Please check the boards(s)/commission(s) you wish to serve on. If you have more than one interest, please number in order of your preference.	
- Affordable Housing Advisory Committee - Airport Advisory Committee - Board of Adjustment * / ** - Golf Advisory Board - Municipal Arts Commission - Municipal Code Enforcement Board * - Municipal Tennis Association Advisory Board	- Ocala Historic Preservation Advisory Board Ocala Housing Authority Planning and Zoning Commission * / ** Recreation Commission - Tree Commission Utility Advisory Board
* Requires Financial Disclosure Form (if appointed to board/commission) ** Requires Property Description	
Property Description:	AFCEN

Until such time as you are selected for the board/commission of your choice, can we submit your application when vacancies occur without contacting you each time? Yes _

Why do you think you are qualified to serve on this Board?

I HEREBY CONFIRM THAT I HAVE READ AND UNDERSTAND THIS APPLICATION, THAT ALL INFORMATION FURNISHED BY ME IS TRUE AND ACCURATE AND THAT, TO THE BEST OF MY KNOWLEDGE, I MEET THE CRITERIA FOR SERVING ON THE BOARD(S)/COMMISSION(\$) FOR WHICH I AM APPLYING.

___ Date: 3 MANCH 2022

Notes:

- (1) Application effective for ONE YEAR from date of completion
- (2) If you have any questions regarding this application, please call the Office of the City Clerk at (352) 629-8266

Return to:

City Clerk's Office 110 SE Watula Avenue Ocala, FL 34471