

City of Butler
Volunteer Board/Commission/Committee Application
(PLEASE PRINT)

Name: _____

Street Address: _____ Zip Code: _____

Home/Cell Phone: _____ Home Fax: _____

Business/Cell Phone: _____ Business Fax: _____

E-mail Address: _____

Are you related to any City of Butler elected officials? If yes, tell us who they are and how they are related.

Do you prefer to be called/e-mailed at your home or business regarding scheduled meetings?

Home Business Either (please circle one)

**Please identify only those areas where you would like to serve, in order of preference.
(1 being the most desired)**

<input type="checkbox"/> Park and Recreation Advisory Commission	<input type="checkbox"/> Airport Commission
<input type="checkbox"/> Industrial Marketing Commission	<input type="checkbox"/> Police Personnel Board
<input type="checkbox"/> Butler Industrial Development Authority	<input type="checkbox"/> Neighborhood Advisory Commission
<input type="checkbox"/> Cemetery Commission	<input type="checkbox"/> Zoning Board of Adjustment
<input type="checkbox"/> Planning Commission	<input type="checkbox"/> Other Interest _____
<input type="checkbox"/> Historic Preservation Committee	

Please briefly describe why you would like to be appointed to serve the community. _____

Signature

Date

(For office use only)

Date Received: _____

Date Distributed: _____

Distributed To: _____

Date Appointed: _____

Term Expires: _____

Notification Letter Mailed: _____

05/29/2020

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