

DATE: 10-19-11

TO: City Clerk

FROM: Mayor Pro Tem Ann Morgan Lilly

ADDRESS 2 Civic Center Plaza

TELEPHONE 915-541-4151

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

Agenda for the Council Meeting of October 25, 2011

Item should read as follows: Re-appointment of Lamar Skarda to the Capital Improvements Advisory Committee as requested by Mayor Pro Tem Ann Morgan Lilly, District 1.

SPECIAL INSTRUCTIONS: _____

BOARD COMMITTEE/COMMISSION APPOINTMENT/REAPPOINTMENT FORM

NAME OF BOARD/COMMITTEE/COMMISSION: CAPITAL IMPROVEMENTS ADVISORY COMMITTEE

NOMINATED BY: Mayor Pro Tem Ann Morgan Lilly DISTRICT: 1

NAME OF APPOINTEE Lamar Skarda
(Please verify correct spelling of name)

BUSINESS ADDRESS: _____

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

HOME ADDRESS: _____

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

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

NAME OF INCUMBENT: Re-appointment

EXPIRATION DATE OF INCUMBENT: 10-28-2011

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

CITY COUNCIL APPROVAL DATE: 10-25-2011

TERM BEGINS ON : 10-28-2011

EXPIRATION DATE OF NEW APPOINTEE: 10-28-2013

PLEASE CHECK ONE OF THE FOLLOWING: 1st TERM: X
2nd TERM: _____
UNEXPIRED TERM: _____