THOMPSONVILLE FIRE DISTRICT NO. 2

CHARTER REVISION COMMITTEE APPLICATION

PLEASE PRINT OR TYPE

Name: _____

Street Address: _____

Phone Number: _____

Email Address: _____

Enrollment in a political party: _____

Please list any talent or skills that you would bring to the committee:

_____

_____

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Signature: _____ Date: _____

Please submit your application to the Thompsonville Fire Station, 35 N. Main Street by **5:00 pm on December 16, 2016**