

# Klamath 9-1-1 Communications District

## Budget Committee Application

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_

Are you a resident of Klamath County? \_\_\_\_\_

Why do you want to be a member of the Budget Committee for the 9-1-1 Center? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What, if any, budgeting experience do you have? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List any additional information or skills that you feel may be helpful to the Budget Committee

\_\_\_\_\_  
\_\_\_\_\_

**I certify the answers given herein are true and complete. I further understand that if I am appointed to the Budget Committee and make false or misleading statements, it will result in the removal from the Committee.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date