



**APPLICATION TO SERVE ON THE MANTECA PUBLIC SAFETY SALES TAX  
OVERSIGHT COMMITTEE**

**NOTE:** Please print or type. If you need additional space, please attach a separate sheet.

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **MANTECA, CA. 9533**\_\_

**TELEPHONE (Business):** \_\_\_\_\_ **(Home):** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**BACKGROUND, EDUCATION, EXPERIENCE:**

**SPECIAL QUALIFICATIONS FOR COMMITTEE:**

**PRIOR PUBLIC SERVICE OR CIVIC ACTIVITY:**

**DO YOU RESIDE WITHIN THE MANTECA CITY LIMITS?    YES    NO**

**WHY DO YOU WANT TO SERVE?**

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DATE

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SIGNATURE

**RETURN TO: OFFICE OF THE CITY CLERK  
CITY OF MANTECA  
1001 W. CENTER STREET  
MANTECA, CA 95337**