## PUBLIC NOTICE CITY OF HOOD RIVER CITY BUDGET COMMITTEE VACANCIES

The City of Hood River is accepting applications for five (5) Budget Committee vacancies. Applications will be accepted until 5:00 p.m. on April 4th, 2022 and may be filed with the City Recorder, City of Hood River, 211 2nd Street, Hood River OR 97031. Interviews will be conducted at the April 11th City Council meeting. Appointees must be qualified voters residing in the City of Hood River. Appointees may not be officers, agents or employees of the City. City Budget Committee members may be used to fill Urban Renewal Agency Budget Committee vacancies as needed. Any information provided may be disclosed to the public upon request. Interested persons should submit a resume setting forth their background, and a statement why they desire an appointment. Applications are available at City Hall, 211 2nd Street, online at https://cityofhoodriver.gov/city-budget-committee/, or by calling (541) 387-5212.



## Application City of Hood River Budget Committee

## APPLICATION DEADLINE: April 4, 2022 5:00p.m. Interviews will be conducted at the April 11, 2022 City Council meeting

The Budget Committee is composed of the governing body (City Council) and an equal number of electors (7) appointed by the governing body. An elector is a qualified voter who has the right to vote for the adoption of any measure. If the governing body cannot find a sufficient number of electors willing to serve, those who are willing and the governing body become the budget committee. If no willing electors can be found, the governing body is the budget committee (ORS 294.336(2)). The appointive members of the budget committee cannot be officers, agents, or employees of the local government (ORS 294.336(4)). Appointive members of the budget committee are appointed for three-year terms. The committee meets as often as necessary to complete the budgetary business.

Any information provided may be disclosed to the public upon request, pursuant to the Oregon Public Records Law.

## Please answer the following questions:

Name:						
Address: _						
Phone:		e-Mail:				
Are you an	elector in th	e City of Ho	od River? Ye	s	No	
			ing forth your desire to be o			

Other comments which would assist the City Council in evaluating your application for this position.					
Date	 Signature				