

**City of Butler
Boards and Authorities**

Name: _____

Address: _____

Phone Number: _____

Email: _____

I am interested in serving on the following Boards and/or Authorities:

Please return form to:

**Mayor and Council
140 West North Street
Butler PA 16001**

or fax to: 724.285.6880

	✓
I am a resident in the City of Butler	<input type="checkbox"/>
I own a business in the City of Butler	<input type="checkbox"/>