



CITY OF GAINESVILLE

**THOMAS D. BUSSING
MAYOR**

November 14, 2001

*Mr. Alex Alonso
17042601 Reid Hall
Gainesville, FL 32612*

Dear Mr. Alonso:

This letter is to certify that at the Monday, November 13, 2001 City Commission Meeting you were appointed to serve as a Student Adjunct Member of the Gainesville Enterprise Zone Development Agency. Your term of office is effective immediately and will expire August 2, 2002.

On behalf of the Gainesville City Commission, I would like to welcome and thank you for your willingness in serving on the Gainesville Enterprise Zone Development Agency.

If you have any questions, or desire further information, please call contact the Staff Liaison Arline Hampton at 334-5027.

Sincerely,

TDB:dla

XC: Staff Liaison Arline Ham

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X <i>Alex Alonso</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: Alex Alonso 17042601 Reid Hall Gainesville, FL 32612	B. Received by (Printed Name) <i>Alex Alonso</i>	C. Date of Delivery <i>12/10/01</i>
2. Article Number <small>(Transfer from service label)</small>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No 3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
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