

City of Gainesville
APPLICATION FOR ADVISORY BOARDS/COMMITTEES
 (Please Print or Type)

BOARDS APPLYING FOR:

1) Bicycle Ped. Advisory Bd.
 2) _____

NAME: Mauri Triulzi

ADDRESS: 630 NE 7 St.

CITY, ST: Gainesville, FL ZIP 32601

PHONE: (HOME) 352 375 7227 (BUSINESS) _____

MEETING DATE ATTENDED:
 1) _____
 2) _____

OCCUPATION/POSITION: Project Coordinator / Educational Trainer

EMPLOYER: University of Florida

Training/Experience related to Board(s)/Committee(s) to which appointment is being sought: _____
I have previously served on the board - am currently
on the board.

EDUCATIONAL BACKGROUND		DEGREE	PROFESSIONAL ORGANIZATIONS
COLLEGE/HIGHER EDUCATION	GRAD?		
<u>UF</u>	<u>yes</u>	<u>BS</u>	
<u>Cal State Hayward</u>	<u>yes</u>	<u>Teaching credential</u>	
High School:	Local:		

REFERENCES	PHONE NUMBER
1) <u>Sherri Boyd</u>	<u>378-1143</u>
2) <u>Denna Gilles</u>	<u>381-9128</u>
3) <u>Martina Ann Barksdell</u>	<u>371-6027</u>

Please indicate any contact made with City Commission members concerning this application		
NAME	Phone Call	E-mail
Mayor T. Bussing		Other/Comments
Commissioner J. Barrow		
Commissioner C. Chestnut		
Commissioner P. Hanrahan		
Commissioner W. Nielsen		

DEMOGRAPHIC INFORMATION
 (Voluntary)

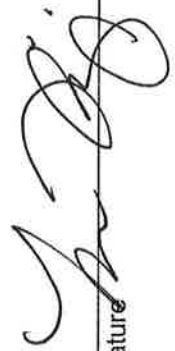
RACE: African American Caucasian Asian American Hispanic American Other

SEX: Male Female

Have you ever been convicted of an Ordinance or Statute other than a minor traffic violation? YES NO
 If YES, please explain: _____

Reside Within City of Gainesville City Limits? YES NO
 (If in Gainesville, please locate residence on attached map)

Are you a "relative" of a member of the City Commission? YES NO
 Section 112.3135, Florida Statutes defines "relative" as: an individual who is related to the public official as father, mother, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half brother, or half sister."

 _____
 Signature Date



Office of the
Clerk of the Commission
Advisory Boards/Committees
P.O. Box 490-18
Gainesville, FL 32602-0490



Lauri Triulzi
Post Office Box 215
Gainesville, FL 32602

City of Gainesville
Office of the Clerk of the Commission
COURTESY NOTICE

Your term on the BICYCLE/PEDESTRIAN ADVISORY BOARD
will be expiring December 31, 2001.

Your current eligibility status is:

Eligible for Re-application

You are eligible for consideration for reappointment. An application will be forwarded to you. Please complete and return to the Clerk's Office by: 4:00 PM, Thursday, December 6, 2001 for consideration in the next selection process.

Ineligible for Re-application

You have served a maximum of two consecutive full terms. You are eligible to reapply after _____ if no one has been appointed to the open position/s. At that time, please request an application from the Clerk's Office at (352) 334-5015 or E-Mail: to clerk@afn.org (ef: 06/97)