



CITY OF GAINESVILLE

**THOMAS D. BUSSING
MAYOR**

November 14, 2001

*Mr. Andrew Chiang
3960 SW 1st Avenue
Gainesville, FL 32607*

Dear Mr. Chiang:

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 Water Management Committee. 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 Water Management Committee.

If you have any questions, or desire further information, please contact the Staff Liaison David Richardson at 334-3400.

Sincerely,

TDB:dla

XC: Staff Liaison David Rich

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
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| <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 <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Andrew Chiang</i> | |
| 1. Article Addressed to: Andrew Chiang 3960 SW 1st Avenue Gainesville, FL 32607 | B. Received by (Printed Name) <i>Andrew Chiang</i> | C. Date of Delivery <i>11/27/01</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 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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