



**CITY OF GAINESVILLE**

**THOMAS D. BUSSING  
MAYOR**

*November 14, 2001*

*Mr. Geoffrey Nadler  
1135 SW 9th Avenue  
Gainesville, FL 32601*

*Dear Mr. Nadler:*

*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 Energy Advisory 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 Gainesville Energy Advisory Committee.*

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

*Sincerely,*

*TDB:dla*

*XC: Staff Liaison Mark Spiller*

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> <i>Geoffrey Nadler</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:  <b>Geoffrey Nadler 1135 SW 9th Avenue Gainesville, FL 32601</b>	B. Received by (Printed Name) <i>Geoffrey Nadler</i>	C. Date of Delivery <i>11/30/01</i>
2. Article Number <small>(Transfer from service label)</small>	D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
PS Form 3811, August 2001	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.	
200 EAST UNIVERSITY AVENUE • P.O. BOX 102595	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <b>7001 0360 0000 6693 7262</b> Domestic Return Receipt 102595-01-M-2501	