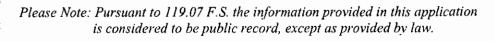
APPLICATION FOR CITY OF RIVIERA BEACH ADVISORY BOARD



7
Board Applying For: / Will Oliver
Name: Mr Adva Home Address:
City: Zip: Zip: Jome Phone No:
Work Phone No: Email Address:
Are you currently serving on a City Board or Committee? YES (NO ()
If so please indicate name: Will Service Date of Service(s) 4 ms
Are you available for day time meetings () evening meetings ()
What would you hope to accomplish by participating if you are appointed? To assist the its in its endousers of promote the extinct funglayer and employer he lationships
Present Employer: Retired 1415 Position:
Address: City: State: Zip:
Profession: Length:
How long have you practiced the above profession?
Preferred mailing address:
Could your occupation or employment present a conflict of interest on municipal subject matters discussed or decided upon by the Advisory Board? YES () NO (NOT SURE () Please explain:
RECEIVED

JUN 2 8 2021

financing, Florida Constitution, and Florida Sta	atutes pertaining to r	nunicipal law:	if none, provide	
your experiences or skills in dealing with busin	ness or communication	on:	slawer slower	
3ltyears of legalmore	Rapplypery	formir	Waborlabor	
- relationships and k	derafinse	Tigates	no ~	
EDUCATIONAL BACKGROUND				
Degree or Certificate Institute of Mullship Bachlor Science Janne	stitution Ollege Slavel ressee State	Jaw University	Course of Study Law Soliting Science	
		9		
Are you registered and actively Vote in Palm B	each County?	YES (1/	NO ()	
Are you currently participating in civic or comm	nunity activities?	YES (1)	NO ()	
If yes, explain: The Vice Resident	Meighbars as	nited Org	angation	
understand the duties, rules and time commitment	nent to the Advisory	Board to which	ch I have applied:	
Signature Da	6/15/2021 te			
How did you learn about the Advisory Board?	ži.			
City's website () Community group ()	Newspaper (Other (1	
If you desire, resume may be attached; Florida I Form, If so, you will be notified upon appointment	Law may require you ent to City Advisory	ı to file a Fina Board.	ncial Disclosure	
Please return application and resume to:				
Office of the City Clerk 600 West Blue Heron Blvd, Riviera Beach, Fl 33404			•	
FOR USE BY CITY OF RIVIERA BEACH				
Appointment by:D	ate:	Expiration De	nte:	
Orientation Date:Notifie	d by City Staff:			