



Office of the Mayor 491 East Pioneer Avenue Homer, Alaska 99603

www.cityofhomer-ak.gov

mayor@ci.homer.ak.us (p) 907-235-3130 (f) 907-235-3143

Memorandum 20-024

TO: HOMER CITY COUNCIL

FROM: MAYOR CASTNER

DATE: FEBRUARY 4, 2020

SUBJECT: RE-APPOINTMENTS TO THE PARKS, ART, RECREATION & CULTURES ADVISORY COMMISSION

Clark Fair, Ingrid Harrald and Peter Roedl are reappointed to the Parks, Art, Recreation & Culture Advisory Commission.

Clark Fair and Peter Roedl terms will expire The terms expire October 31, 2022.

Ingrid Harrald's term will expire October 31, 2023.

Recommendation: Confirm the reappointments of Clark Fair, Ingrid Harrald and Peter Roedl to the Parks, Art, Recreation & Culture Advisory Commission.



The Information provided on this form will provide the basic information to the Mayor and City Council on your interest in serving on the selected Advisory Body. It is considered public and will be included in the City Council meeting packet. This information will be published in the City Directory and within city web pages if you are reappointed by the Mayor and your reappointment is confirmed by the City Council.

APPLICANT INFORMATION

Full Name:				
Physical Address Where you Claim Residency:				
Mailing Address:	City:	State:	Zip:	
Phone:	Email:			
Cell#:	_ Work #:			

ADVISORY BODY YOU ARE REQUESTING REAPPOINTMENT TO:

□ ADVISORY PLANNING COMMISSION

□ PARKS, ART, RECREATION & CULTURE ADVISORY COMMISSION

D PORT & HARBOR ADVISORY COMMISSION

□ ECONOMIC DEVELOPMENT ADVISORY COMMISSION

LIBRARY ADVISORY BOARD

D OTHER – PLEASE INDICATE _____

CITY OF HOMER PUBLIC OFFICIAL CONFLICT OF INTEREST DISCLOSURE STATEMENT

Do you have a current Public Official Conflict of Interest Disclosure Statement on file with the City Clerk as required by HCC 1.18.043?

PLEASE PROVIDE THE FOLLOWING

Do you fill a seat for a City Resident \square or Non Resident \square

Has your residency changed since your last appointment? \Box Yes \Box No

PLEASE PROVIDE THE FOLLOWING

How long have you served on the advisory body?

Please briefly explain why you wish to be reappointed to the Advisory Body to which you currently serve. This may include information on accomplishments or projects completed, future goals for the body, or any additional information that may assist the Mayor in the decision making process. (You may attach an additional page if needed)

Please list any current memberships or organizations that you belong to related to the advisory body you serve on:



Advisory Body Application For Reappointment to Committees, Commissions, Board & Task Forces

Office of the City Clerk 491 East Pioneer Avenue Homer, Alaska 99603 Phone: (907) 235-3130 Fax: (907) 235-3143 clerk@cityofhomer-ak.gov

> Received City Clerk's Office

FEB 0 4 2020

City of Homer Alaska

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APPLICANT INFORMATION	
Full Name: Ingrid Harrald	
Physical Address Where you Claim Residency: Waterman Pd 40521	
Mailing Address: PO Box 2665 City: Homer State: AK Zip: 89603	
Mailing Address: POBOX 2665 City: Homer State: AK Zip: 99603 (967) 299-4370 Email: Marvald@hotmail.com	
Cell#: Work #: 907 - 235 - 5558	
Cell#:	

ADVISORY BODY YOU ARE REQUESTING REAPPOINTMENT TO:

□ ADVISORY PLANNING COMMISSION

PARKS, ART, RECREATION & CULTURE ADVISORY COMMISSION

D PORT & HARBOR ADVISORY COMMISSION

□ ECONOMIC DEVELOPMENT ADVISORY COMMISSION

LIBRARY ADVISORY BOARD

□ OTHER – PLEASE INDICATE _

CITY OF HOMER PUBLIC OFFICIAL CONFLICT OF INTEREST DISCLOSURE STATEMENT

Do you have a current Public Official Conflict of Interest Disclosure Statement on file with the City Clerk as required by HCC 1.18.043? Ves N' No

PLEASE PROVIDE THE FOLLOWING

Do you fill a seat for a City Resident 🗖 or Non Resident 📿

Has your residency changed since your last appointment? Kes 🛛 No

PLEASE PROVIDE THE FOLLOWING

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APPLICANT INFORMATION

Full Name: Peter Roed

Physical Address Where you Claim Residency: 4029 Main Street Homer, AK 99603

Mailing Address: Same

Phone: _

_____ City: _____ State: _____ Zip: _____ _____ Email: peter.roedl@gmail.com

Work #:_____

_{Cell#:} 907-399-6227

ADVISORY BODY YOU ARE REQUESTING REAPPOINTMENT TO:

□ ADVISORY PLANNING COMMISSION

PARKS, ART, RECREATION & CULTURE ADVISORY COMMISSION

D PORT & HARBOR ADVISORY COMMISSION

ECONOMIC DEVELOPMENT ADVISORY COMMISSION

LIBRARY ADVISORY BOARD

OTHER – PLEASE INDICATE

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