

CITY OF TEXARKANA, ARKANSAS

CITY CLERK'S OFFICE
TEXARKANA, AR

Application for Appointment to Citizen Advisory Board or Commission

(Please type or print clearly)

BOARD OR COMMISSION DESIRED (Please apply for one (1) board or commission per application.)

- Advertising & Promotion Commission
- Airport Authority
- City Beautiful Commission
- Board of Adjustment
- Civil Service Commission
- Electrical Review Board
- Heating & Air Conditioning Board of Review

- Historical District Commission
- Library Board
- Municipal Auditorium Project Advisory Commission
- Planning Commission
- Plumbing Review Board
- Other:

RECEIVED
MAR 10 2017
By: J.W.

Name: Matt Keil Home Phone: 903-277-0550

Address: 6515 Wuthering Heights Texarkana Resident Yes No 46 Years

E-Mail Address: mkeil@kglawfirm.com Miller Co. Voter Registration No. _____

Employer: Keil + Guason, P.A. Work Phone: 870-772-4113

Position: Partner / Attorney

Education: College: UoB A law School High School: Arkansas High Class "77"

Special knowledge or past experience qualifying you for this appointment:
I have a deep respect for law enforcement, firefighters and emergency personnel and I have worked with these professionals during my 29 years of legal practice.

Other relevant information (civic activities, memberships, etc.):

Special knowledge or past experience qualifying you for this appointment (Please feel free to attach resume):

References: List the name and phone number of at least one Texarkana resident as a reference, especially any City staff, City Council, or current Committee members who may be contacted on your behalf.
Name: Mr. Hayes McClellin Phone Number: 903-277-0932

Interest: Explain why you are interested in being appointed to this board or commission.
My father, Dean Keil has served on the board as well as my mentor Mr. Hayes McClellin.

Experience: Indicate what meeting(s) you have attended of the committee for which you wish to be considered.
N/A

Number of Texarkana, Arkansas Board of Directors Meetings you have attended in the past 12 months: I have not attended any meetings in person but have watched 5-7 on television.

Please read the statement below and sign your name to indicate your understanding.
I UNDERSTAND MY ATTENDANCE WILL BE REQUIRED AT ALL COMMITTEE MEETINGS AND THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT.

Signature of Applicant: [Signature] Date Submitted: _____

Return completed application to:
216 Walnut Street (or)
P O Box 2711
Texarkana TX 75504-2711
Phone 870-779-4991 or Fax 870-774-3170

CITY CLERK'S OFFICE
TEXARKANA, AR
RECEIVED
DEC 17 2015
By: [Signature]

Please Note: This application will be on file for one (1) year.