

APPOINTMENT FORM - GENERAL ASSEMBLY REPRESENTATIVE CAPITAL AREA COUNCIL OF GOVERNMENTS

The governing bodies of CAPCOG's members designate General Assembly representatives.

PLEASE COMPLETE THE FO	OLLOWING SECTION	
Governing Body:		
	nty Commissioners Court (e.g., <u>Travis</u> County Commissioners Co	urt)
	OR- Council (e.g., <u>Austin</u> City Council)	
	OR-	
Othe	er (Board or other governing body)	
Pedernales Electric Coop	pperative, Inc.	
City, County, or Organization	on being represented	
Shannon Johnson	Public Affairs and Policy Advisor	
Name of Representative	Position	
P.O. Box 1		
Address		
Johnson City, 78636		
City, Zip Code		
(830) 330-4273		
Telephone Number	Fax Number	
shannon.johnson@peci.c	com	
Email address (General Asser	embly Reps. will be subscribed to the CAPCOG Connections, Training, &	& Data Points email lists
Check One:		
Reappointme	ent	
Filling Vacano	су	
Changing Rep		
	Name of Previous Representative	
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I confirm our governing bo	ody appointed the above individual to serve as a CAPCOG Gener	al Assembly
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