NAME William F. Boswell	COUNCIL DISTRICT 4	<u> </u>
ADDRESS ADDRESS	ZIP	<u> </u>
PHONE (home) PHO	ONE (business or cell)	
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rase send completed form to: City of Rochester Hills, Clerk's Office, 1000 Roch IIS INFORMATION WILL BE KEPT ON FILE IN THE UESTIONNAIRES ARE REVIEWED BY THE MAYOR, CI	hester Hills Drive, Rochester Hills, MI 48309 or fax to 248.656.47 MAYOR'S/CLERK'S OFFICES AND IS NOT CO	144 ONFIDENTIA ONNEI

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