

# Northeast Minnesota Emergency Communications Board

## 2021 **Emergency Communications Board (ECB)** Appointment Form

The following appointments have been made by the governing body of \_\_\_\_\_  
representing agency  
 \_\_\_\_\_  
choose one from drop down list in accordance with the terms of the Joint Powers Agreement governing  
 the Northeast Minnesota Emergency Communications Board to provide authorized representation to serve a  
 term commencing \_\_\_\_\_ on the \_\_\_\_\_ Emergency Communications Board  
effective date  
 \_\_\_\_\_ a member of the Northeast Minnesota  
representing agency \_\_\_\_\_  
choose one from drop down list  
 Emergency Communications Board:

- Emergency Communications Board (ECB):** (1) Representative (1) Alternate
- Regional Advisory Committee (RAC):** (1) Representative (1) Alternate
- Users Committee:** (1-5) Representatives
- Owner & Operators Committee (O&O):** (1) Representative (1) Alternate

**REPRESENTATIVE:**

Name

Title

Address

City/State/Zip

Email

Phone

**ALTERNATE:**

Name

Title

Address

City/State/Zip

Email

Phone

I certify the appointments herein listed have been approved by the governing body/appointing authority of  
 \_\_\_\_\_, a member of the Northeast Minnesota  
representing agency \_\_\_\_\_  
choose one from drop down list  
 Emergency Communications Board (ECB), this \_\_\_\_\_ day of \_\_\_\_\_, 2021  
date month

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_