



ATTENTION CITY/TOWN CLERKS!

June 7, 2021

Please complete the information below and fax or mail back to the MML office ASAP. We are beginning to compile the data for the 2021 MML Membership Database. As you can imagine, this is a very complex and detailed project and if you can provide us this information now, it would be extremely helpful.

****Please note, an electronic version of this survey has been emailed to all city clerks if you'd rather complete this survey digitally. If you did not receive the electronic version, please contact the MML office.****

Please call our office at (601) 353-5854 if you have questions. Thanks for your help!

PLEASE FAX, EMAIL OR MAIL THE COMPLETED INFORMATION TO:

**June Dunlap, Member Services Coordinator
Mississippi Municipal League
600 E. Amite Street, Suite 104
Jackson, MS 39201
june1@mmlonline.com
(fax) 601-353-6980**

2021 MML Database Update:

Please print or type:

Name of person completing this form: _____ Date: _____

Name of City/Village/Town: _____

Population: _____ County: _____ Year Incorporated _____

City Hall Physical Address: _____

Mailing Address: _____

Business Hours: _____ Board Meeting Dates: _____

Phone: _____ Fax: _____

City/Town Website: _____

Municipal Facebook Page: _____ Municipal Twitter Handle: @ _____

Date of Next Election: _____ Number of City Employees: Part Time _____ Full Time _____

Planning & Development District: _____ Supreme Court District: _____

Mayor and Board Member Information

Title / Full Name / Ward # / Party Affiliation: Republican (R), Democrat (D), Independent (I)

Mayor:

_____ NAME _____ WARD _____ PARTY AFFILIATION _____ # OF YEARS IN OFFICE

Mayor's email address: _____ Newly Elected Yes No

Male Female Race _____ Cell Number _____

If newly elected, who did you replace? _____

Board Members:

Example: Alderman John W. Doe, Ward 1, (D)

1. _____ TITLE _____ NAME

_____ WARD _____ PARTY AFFILIATION ® _____ # OF YEARS IN OFFICE

Email _____ Newly Elected Yes No

Male Female Race _____ Cell Number _____

If newly elected, who did you replace? _____

2. _____
TITTLE NAME

WARD PARTY AFFILIATION # OF YEARS IN OFFICE

Email _____ Newly Elected __Yes __No

Male ___ Female ___ Race _____ Cell Number _____

If newly elected, who did you replace? _____

3. _____
TITTLE NAME

WARD PARTY AFFILIATION # OF YEARS IN OFFICE

Email _____ Newly Elected __Yes __No

Male ___ Female ___ Race _____ Cell Number _____

If newly elected, who did you replace? _____

4. _____
TITTLE NAME

WARD PARTY AFFILIATION # OF YEARS IN OFFICE

Email _____ Newly Elected __Yes __No

Male ___ Female ___ Race _____ Cell Number _____

If newly elected, who did you replace? _____

5. _____
TITTLE NAME

WARD PARTY AFFILIATION # OF YEARS IN OFFICE

Email _____ Newly Elected __Yes __No

Male ___ Female ___ Race _____ Cell Number _____

If newly elected, who did you replace? _____

6. _____
TITTLE NAME

WARD PARTY AFFILIATION # OF YEARS IN OFFICE

Email _____ Newly Elected __Yes __No

Male ___ Female ___ Race _____ Cell Number _____

If newly elected, who did you replace? _____

7. _____
TITLE NAME

_____ WARD PARTY AFFILIATION # OF YEARS IN OFFICE

Email _____ Newly Elected __Yes __No

Male ___ Female ___ Race _____ Cell Number _____

If newly elected, who did you replace? _____

Administrative Staff:

City Clerk: _____ Office Number: _____

Email Address: _____ Cell Number: _____

City Manager: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Mayor's Secretary: _____ Office Number: _____

Email Address: _____ Cell Number: _____

CAO: _____ Office Number: _____

Email Address: _____ Cell Number: _____

***Please provide name, phone and email addresses for all departments. If an individual has more than one title please provide just their main title.**

Water/Sewer Administrator: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Water Plant Operator: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Wastewater Plant Operator: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Community Dev. Director: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Personnel Manager: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Purchasing Manager: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Building Inspector: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Housing Inspector: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Planning/Zoning Director: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Police Chief: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Fire Chief: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Court Clerk: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Emergency Manager: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Risk Manager/Safety Director: _____ Office Number: _____

Email Address: _____ Cell Number: _____

City Attorney: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Prosecuting Attorney: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Municipal Judge: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Parks & Recreation Director: _____ Office Number: _____

Email Address: _____ Cell Number: _____

Public Works Director: _____ Office Number: _____

Email Address: _____ Cell Number: _____

City Engineer: _____ Office Number: _____

Email Address: _____ Cell Number: _____