

AREA COMMISSION APPOINTMENT FORM

The Department of Neighborhoods maintains the database for the Area Commission members in the City of Columbus. The information on this form is used to process the Mayor's appointment and ensure timely and accurate distribution of meeting notices, training opportunities, and other City activities. Please complete all sections of the form with information about your recently elected/appointed commissioner within seven (7) days of the election/appointment. After completing and signing this form, please return it, along with the appointees resume and/or biography to your Neighborhood Liaison via email. Please contact your Neighborhood Liaison with any questions or comments.

Please Type Westland Area Commission Area Commission Name Are there changes to this information? Yes No \(\square\$ Please check New appointment appropriate box Reappointment X Nancy First Name Day-Achauer Last Name Title (i.e. officer / Commissioner commissioner) 5951 Luccis Ct Address Columbus City Ohio State 43228 Zip Code 740-417-0137 Cell Telephone 614-263-5145 Work Telephone pastor.nancy.d.a@gmail.com **Email Address** Elected District/Designation September 18, 2019 Term Start Date X December 31, 2022 Term Expiration Re-elected to former seat Seat Succession

Area Commission Chair Signature Court Toylo

ALL SECTIONS OF THIS FORM MUST BE COMPLETED

DISCLAIMER: all information and materials that you submit in support of your appointment as an area commissioner are subject to Ohio Public Records Law