

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

Area Commission Name	mission Name Greater Hilltop Area Commission	
Please check appropriate box	New appointment ⊠ Reappointment □	Are there changes to this information? Yes ⊠ No □
First Name	Simon	х
Last Name	Dallas	X
Title (i.e. officer / commissioner)	Commissioner	Х
Address	58 N. Westmoor Ave.	x
City	Columbus	X
State	ОН	X
Zip Code	43204	X
Home Telephone	513-258-4790	X
Work Telephone	513-258-4790	X
Email Address	SimonDallasGHAC@gmail.com	X
District/Designation	Greater Hilltop Area Commission	X
Term Start Date	January 1, 2022	X
Term Expiration	December 31, 2024	X
Seat Succession	Replacing Pam Weaver	

Area Commission Chair Signature

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