

## 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 Columbus Southside Area Commission **Area Commission Name** Please check Are there changes to this New appointment appropriate box information? Yes No 🖂 Reappointment First Name Justin Last Name Soltesz Title (i.e. officer / Commissioner commissioner) Address 59 Frebis Ave Columbus City State Ohio 43206 Zip Code 614-832-6960 Home Telephone Work Telephone **Email Address** Justin.Soltesz@gmail.com District/Designation At-Large Resident Term Start Date 1/1/2023 12/31/2025 Term Expiration

Area Commission Chair Signature

Seat Succession

\*\*\*ALL SECTIONS OF THIS FORM MUST BE COMPLETED\*\*\*

James E. Giffin

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

Erin Synk