

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.

Area Commission Name	Insert AC Name Area Commission			
Please check appropriate box	New appointment Reappointment	Are there changes to this information? Yes \(\square \) No \(\square \)		
First Name	Sharon			
Last Name	Ware .			
Title (i.e. officer / commissioner)	Commissioner			
Address	4229 Ellery Dr.			
City	Columbus			
State	Ohio			
Zip Code	43227			
Home Telephone	614-516-3256			
Work Telephone				
Email Address	Sharonware.mac@gmail.com	-		
District/Designation	Thunderbird Acres	740		
Term Start Date	1/1/2020			
Term Expiration	12/31/2022			
Seat Succession				

Area Commission Chair Signature Run, 11. Barner

ALL SECTIONS OF THIS FORM MUST BE COMPLETED