

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	Milo-Grogan	
Please check appropriate box	New appointment <input type="checkbox"/> Reappointment <input checked="" type="checkbox"/>	Are there changes to this information? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
First Name	Angelique	
Last Name	Sutton	
Title (i.e. officer / commissioner)	Commissioner	
Address	864 E. 4th Ave	
City	Columbus	
State	Ohio	
Zip Code	43201	
Home Telephone	614-365-1711	
Work Telephone	N/A	
Email Address	angelique.mgac@gmail.com (updated email) X	
District/Designation	Milo-Grogan Area Commission	
Term Start Date	1/1/2023	
Term Expiration	12/31/2025	
Seat Succession	Angelique Sutton	

Area Commission Chair Signature

X Charles Thompson

ALL SECTIONS OF THIS FORM MUST BE COMPLETED