

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	Far East Area Commission	
Please check appropriate box	New appointment <input type="checkbox"/>	Are there changes to this information? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Reappointment <input checked="" type="checkbox"/>	
First Name	Susan	
Last Name	Johnson	
Title (i.e. officer / commissioner)	-----	
Address	5683 Oakmont Dr.	
City	Columbus	
State	Ohio	
Zip Code	43232	
Home Telephone	614.577.9425	
Work Telephone	-----	
Email Address	Sjohnson5683@yahoo.com	
District/Designation	District 3	
Term Start Date	1/1/25	
Term Expiration	12/31/27	
Seat Succession	Seat 03	

Area Commission Chair Signature _____ Jennifer Chamberlain _____

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