

## 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 Westland Area Commission Please check Are there changes to this New appointment 🖂 appropriate box information? Yes No Reappointment \_ First Name Janet Cahill Last Name Title (i.e. officer / Commissioner commissioner) Address 361 Cloverhill Drive Galloway City OH State 43119 Zip Code 614-715-1070 Home Telephone Work Telephone N/A janetcahill98@gmail.com Email Address N/A District/Designation Term Start Date 1/1/2021 Term Expiration 12/31/2023 N/A Seat Succession

Area Commission Chair Signature

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