

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	Mideast	
Please check appropriate box	New appointment ☐ Reappointment ⊠	Are there changes to this information? Yes ⊠ No □
First Name	Denise	
Last Name	Friend Foster	
Title (i.e. officer / commissioner)	Commissioner	
Address	2894 Dover Road	
City	Columbus	
State	Ohio	
Zip Code	43209	
Home Telephone	614-239-6555	
Work Telephone	614-329-4033	
Email Address	dfriendfoster.mac@gmail.com	
District/Designation	Berwick	
Term Start Date	1/1/24	
Term Expiration	12/31/26	
Seat Succession	Denise Friend Foster	Yes

Area Commission Chair Signature Lelive Q. Sandy

ALL SECTIONS OF THIS FORM MUST BE COMPLETED

Add Bio: