

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	Southwest Area Commission	
Please check appropriate box	New appointment <input checked="" type="checkbox"/> Reappointment <input type="checkbox"/>	Are there changes to this information? Yes <input type="checkbox"/> No <input type="checkbox"/>
First Name	Peggy	
Last Name	Fossett	
Title (i.e. officer / commissioner)		
Address	1562 Hopkins Ave.	
City	Columbus	
State	Ohio	
Zip Code	43223	
Home Telephone	614-279-0541	
Work Telephone		
Email Address	pfossett41@gmail.com	
District/Designation		
Term Start Date	Sept 18, 2018	
Term Expiration	Sept 15, 2021	
Seat Succession		

Area Commission Chair Signature _____

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