

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	5 th by Northwest Area Commission	
Please check appropriate box	New appointment ☐ Reappointment ⊠	Are there changes to this information? Yes No
First Name	Brad	
Last Name	Conway	
Title (i.e. officer / commissioner)	Commissioner	
Address	3891 Mountview Road	
City	Columbus	
State	Ohio	
Zip Code	432220	
Home Telephone	614-565-5451	
Work Telephone		
Email Address	bradaconway@gmail.com	
District/Designation	At large	
Term Start Date	1/1/2022	
Term Expiration	12/31/2024	
Seat Succession	Re-elected	

Area Commission Chair Signature _____William Colgan_____

ALL SECTIONS OF THIS FORM MUST BE COMPLETED

DISCLAIMER: all information and materials that you submit in support of your appointment as an area commissioner are subject to Ohio Public Records Law