

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	Franklinton Area Commission	
Please check appropriate box	New appointment ⊠ Reappointment □	Are there changes to this information? Yes □ No ⊠
First Name	Eron	
Last Name	Spink	
Title (i.e. officer / commissioner)	Commissioner	
Address	1078 Scott St	
City	Columbus	
State	ОН	
Zip Code	43222	
Home Telephone	380-209-6297	,
Work Telephone		
Email Address	espink.fac@gmail.com	
District/Designation	Resident Seat	
Term Start Date	January 13, 2022	
Term Expiration	December 31, 2022	
Seat Succession	Filling Vacant Seat	

Area Commission Chair Signature __Jacqueline_Miles Chair

ALL SECTIONS OF THIS FORM MUST BE COMPLETED