

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 Are there changes to this New appointment appropriate box information? Yes 🔲 No 🔀 Reappointment X First Name Steve Pullen Last Name Title (i.e. officer / Commissioner commissioner) 1061 W Town St Address Columbus City Ohio State 43222 Zip Code 614-430-8457 Home Telephone Work Telephone 614-479-3413 spullen@columbuslibrary.org **Email Address** District/Designation Appointed 01/01/2021 Term Start Date Term Expiration 12/31/2023 **Seat Succession** N/A

ALL SECTIONS OF THIS FORM MUST BE COMPLETED