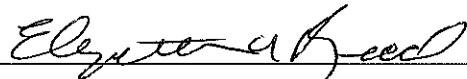


AREA COMMISSION APPOINTMENT FORM

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 type="checkbox"/> Reappointment <input checked="" type="checkbox"/>	Are there changes to this information? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
First Name	Kristin	
Last Name	Hayes	
Title (i.e. officer / commissioner)	Commissioner	
Address	1784 Rock Creek Drive	
City	Grove City	
State	OH	
Zip Code	43123	
Home Telephone	(419)388-3631	
Work Telephone	N/A	
Email Address	<u>kristinhayes.swac@gmail.com</u>	
District/Designation	Elected	
Term Start Date	1/1/2026	
Term Expiration	12/31/2028	
Seat Succession	Self	

Area Commission Chair Signature 

*****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