

**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**

<b>Area Commission Name</b>	<b>Milo-Grogan</b>	
<b>Please check appropriate box</b>	<b>New appointment</b> <input type="checkbox"/> <b>Reappointment</b> <input type="checkbox"/>	<b>Are there changes to this information? Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>
First Name	Daisy	
Last Name	Milner	
Title (i.e. officer / commissioner)	Commissioner	
Address	861 East 4th Ave	
City	Columbus	
State	Ohio	
Zip Code	43201	
Home Telephone	614-595-9935	
Work Telephone		
Email Address	Livloveangie87@gmail.com	
District/Designation		
Term Start Date	10/30/2018	
Term Expiration	11/12/2019	
Seat Succession	Reappointment	

Area Commission Chair Signature \_\_\_\_\_

*Charles Hopkins*

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