

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 <input checked="" type="checkbox"/> Reappointment <input type="checkbox"/>	Are there changes to this information? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
First Name	Robert “Chris”	
Last Name	Winchester	
Title (i.e. officer / commissioner)	Commissioner	
Address	41 Martin Ave	
City	Columbus	
State	Ohio	
Zip Code	43222	
Home Telephone	614-929-6339	
Cell Telephone	614-535-7473	
Email Address	Chris.win@sbcglobal.net	
District/Designation	Franklinton	
Term Start Date	03/12/2019	
Term Expiration	10/31/2019	
Seat Succession		

Area Commission Chair Signature _____

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

Bio:

I have previously been a Franklinton Area Commissioner and would like to continue to better the community. I have talked to my neighbors and they have told me their comments and concerns and would like to see me follow through with their ideas.