

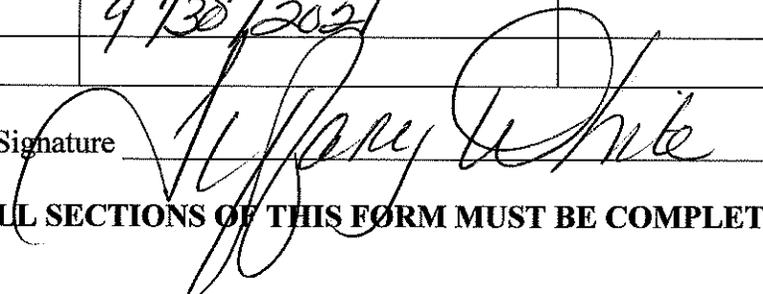
AREA COMMISSION APPOINTMENT FORM

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		
Please check appropriate box	New appointment <input type="checkbox"/> Reappointment <input checked="" type="checkbox"/>	Are there changes to this information? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
First Name	Tiffany	
Last Name	White	
Title (i.e. officer / commissioner)	Commissioner	
Address	1204 Woodruff Ave	
City	Columbus	
State	Ohio	
Zip Code	43219	
Home Telephone	614 570 5369	
Work Telephone		
Email Address	tiffanywhite9@aol.com	
District/Designation	Oride Heights	
Term Start Date	10/1/2019	
Term Expiration	9/30/2021	
Seat Succession		

Area Commission Chair Signature



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