

## 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 **Insert AC Name** Area Commission Area Commission Name **Far South Columbus Area** Please check Are there changes to this New appointment appropriate box information? Yes No x Reappointment x First Name John Last Name Ferrell Commissioner/ Economic Title (i.e. officer / commissioner) **Development Chair** Address 645 Sheldon Columbus City Ohio State 43207 Zip Code 614 309 9637 Home Telephone Work Telephone **Email Address** jonnferrell@msn.com District/Designation Zone 2 /Clergy Appointed Term Start Date 6/2/2020 Term Expiration 6/30/2023 Seat Succession

Area Commission Chair Signature Delores Richardson

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