



# Community Criminal Justice Board

*Vacancies as of  
November 12, 2023*

**Fifteen (15) members** appointed by the City Council, to include the following:

- A Judge of the Circuit Court
- A Judge of the General District Court
- A Judge of the Juvenile and Domestic Relations Court
- The Chief Magistrate
- The Chief of Police
- An Attorney for the Commonwealth
- The Public Defender or an attorney who is experienced in the defense of criminal matters
- The Sheriff;
- A local educator
- An administrator of a community services board
- A City Council member
- Four (4) citizen members (at-large members may be selected from nominees presented to the City Council by the board)

*(Assigned to the Public Safety Standing Committee)*

<b>Current Vacancies</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Judge David Eugene Cheek, Sr.	Judge, Richmond Circuit Court	4 <sup>th</sup>	First	5/23/2023
			<i>Retired</i>	
Terry Frye	At-large city resident	4 <sup>th</sup>	Second	9/14/2023
			<i>Term limit</i>	
Dr. Michon Moon	At-large city resident	6 <sup>th</sup> District Employment	Partial	9/10/2023
			<i>Application included</i>	
Tracy E. Paner	Public Defender	6 <sup>th</sup> District Employment	Fourth	9/14/2023
			<i>Application included</i>	
Judge Mansi Shah	Judge, Richmond General District Court Criminal Division	6 <sup>th</sup> District Employment	First	5/23/2023
			<i>Application included</i>	
Gary M. Wooldridge	Chief Magistrate	2 <sup>nd</sup> District Employment	Indefinite	Indefinite
<b>Current Membership</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Dr. Blythe A. Bowman Balestrieri	Local Educator	2 <sup>nd</sup> District Employment	Third	4/14/2024
Acting Police Chief Rick Edwards	Richmond Police Department	2 <sup>nd</sup> District Employment	Indefinite	Indefinite
Crystal Fitzgerald	Designee/An Attorney of the Commonwealth	6 <sup>th</sup> District Employment	Second	2/10/2024

## Current Membership

Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Judge Marilyn C. Goss	Judge, Juvenile & Domestic Relations Court	6 <sup>th</sup> District Employment	Third	3/11/2024
Sheriff Antionette Irving	Sheriff	6 <sup>th</sup> District Employment	Indefinite	Indefinite
Elizabeth Johnson	At-large city resident	6 <sup>th</sup>	Second	4/14/2024
Lila Kelso	At-large city resident	3 <sup>rd</sup>	First	4/14/2024
John Lindstrom	An administrator of a community services board	6 <sup>th</sup> District Employment	Fifth	6/12/2025
Ann-Frances Lambert	City Council Representative	3 <sup>rd</sup>	First	12/31/2024

**Contact:**

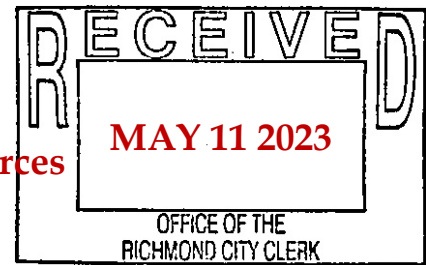
Rhonda Gilmer  
Adult Services Manager  
Department of Justice Services  
804-646-5410 (0)  
[Rhonda.gilmer@richmondgov.com](mailto:Rhonda.gilmer@richmondgov.com)



City of Richmond, Virginia  
City Council

Authorities, Boards, Commissions and Task Forces

Reappointment Application



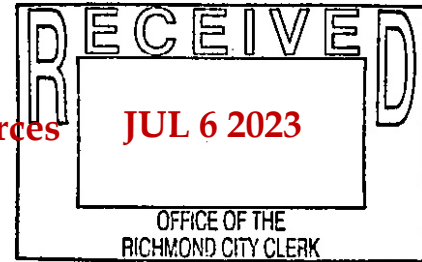
(Please Print or Type)

Name of Authority, Board, Commission or Task Force:	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other:	
Last Name:	First Name:
Home Street Address:	Home Telephone:
Home City, Zip Code:	Home Fax:
Personal E-Mail Address:	
Employer:	
Job Title:	How Long?
Business Street Address:	Business Telephone:
Business City, Zip Code:	Business Fax:
Business E-Mail Address:	
Is your place of employment located in the city of Richmond? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is your place of employment located in the county? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which county?	
Are you a city resident? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? Number of years?	
Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please provide information on the nature of the contract.	
Signature: <u>Macy E. Pauer</u>	Date: _____
<i>(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge.)</i>	



City of Richmond, Virginia  
City Council

Authorities, Boards, Commissions and Task Forces  
**Reappointment Application**



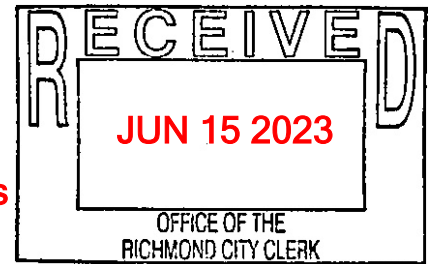
(Please Print or Type)

Name of Authority, Board, Commission or Task Force: <b>COMMUNITY CRIMINAL JUSTICE BOARD</b>	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input checked="" type="checkbox"/> Other:	
Last Name: <b>Moon</b>	First Name: <b>Michon</b>
Home Street Address: <b>5725 Victoria Park Terrace</b>	Home Telephone: <b>405-3588</b>
Home City, Zip Code: <b>N. Chesterfield 23234</b>	Home Fax:
Personal E-Mail Address: <b>mjmoon58@gmail.com</b>	
Employer: <b>The JXN Project</b>	
Job Title: <b>Operations and Grant Manager</b>	How Long? <b>3 yrs</b>
Business Street Address: <b>313 W. Broad Street</b>	Business Telephone: <b>405-3588</b>
Business City, Zip Code: <b>Richmond, 23219</b>	Business Fax:
Business E-Mail Address: <b>michon@thejxnproject.org</b>	
Is your place of employment located in the city of Richmond? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Is your place of employment located in the county? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, which county?	
Are you a city resident? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, which City Council district? Number of years?	
Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please provide information on the nature of the contract.	
Signature: <u>Michon J Moon</u> Date: <u>07/06/2023</u>	
(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge.)	



City of Richmond, Virginia
City Council

Authorities, Boards, Commissions, and Task Forces



(Name of Authority, Board, Commission or Task Force)

COMMUNITY CRIMINAL JUSTICE BOARD

Form fields for applicant information: Title (Mr.), Name (David W Smith David), Home Address (008337 8337 ABBEY RD RICHMOND VA 23235), Home Telephone (8044815934), Personal E-Mail Address (dwsmith78@gmail.com), Employer (Inthrive), Job Title (Principal & Founder), Business Address (008337 8337 ABBEY RD 8337 RICHMOND VA 23235), Business Telephone (8044815934), Business E-Mail Address (David@InthiveAdvocacy.com), Is Your Place of Employment Located in the city of Richmond? (Yes), Is your Place of Employment Located in the County? (No), Are You A City Resident? (Yes), Number of Years? (7)

Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? No

If yes, please provide information on the nature of the contract.

Please List Your Educational Background and/or Other Expertise or Qualifications You Will Bring to This Authority, Board, Commission or Task Force:

- Board of Directors: OAR-Richmond
Board Secretary: Safer Virginia
Lobbyist that focuses on public safety issues in Virginia
Founder & Festival Director of Inthrive Film Festival, the first film festival whose mission is to elevate and celebrate the voices and talents of the formerly incarcerated
Former Chair of the Virginia Coalition on Solitary Confinement
Former Board of Directors with Interfaith Action for Human Rights
Former planning council member Virginia Prison Justice Network

NOTE: This application is a public document. Completed applications will remain on file for consideration for six (6) months at which time it must be updated.



City of Richmond, Virginia  
City Council

**Authorities, Boards, Commissions, and Task Forces Application**

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List other city of Richmond Authorities, Boards, Commissions or Task Forces you currently or have previously served on. Please give date(s) and office(s) held, if applicable.

*BA-Mary Washington College  
MDiv-Concordia Seminary*

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Other Community Involvement:

*n/a*

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(OPTIONAL) Please List Additional Information You Would Like Considered, or You May Copy and Paste Your Short Resume.

*Bethlehem Lutheran-Richmond: Church Council*

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How Did You Hear About or Who Referred You to Apply for Appointment to This Authority, Board, Commission or Task Force?

*Advocacy & Policy Experience*

*Inthrive, Richmond, VA  
Lobbyist, Trainer, & Strategic Planner(Nov*

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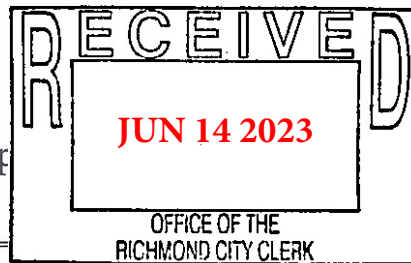
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City of Richmond, Virginia  
City Council

Authorities, Boards, Commissions and Task Forces App

(Please Print or Type)



Name of Authority, Board, Commission or Task Force: *CCJB*

Title: Mr.  Mrs.  Ms.  Miss.  Dr.  Other:

Last Name: *Haskin*

First Name: *DJ*

Home Street Address:

Home Telephone:

Home City, Zip Code:

Home Fax:

Personal E-Mail Address:

Employer: *Supreme Court of Virginia - Office of the Executive Secretary*

Job Title: *Chief Magistrate*

How Long? *4 months*

Business Street Address: *1701 Fairfield Way*

Business Telephone: *804-646-6691*

Business City, Zip Code: *Richmond, VA 23223*

Business Fax: *804-646-2852*

Business E-Mail Address: *dhaskin@vacourts.gov*

Is your place of employment located in the city of Richmond? Yes  No

Is your place of employment located in the county? Yes  No  If yes, which county?

Are you a city resident? Yes  No  If yes, which City Council district? Number of years?

Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes  No

If yes, please provide information on the nature of the contract.

Please list your educational background and/or other expertise or qualifications you will bring to this authority, board, commission or task force:

*Juris Doctor*

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Office of the City Clerk, 900 East Broad Street, Suite 200, Richmond, Virginia U.S.A. 23219  
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[www.richmondgov.com/cityclerk](http://www.richmondgov.com/cityclerk)





City of Richmond, Virginia

City Council

Authorities, Boards, Commissions and Task Forces Application

List other city of Richmond authorities, boards, commissions or task forces you currently or have previously served on. Please give date(s) and office(s) held, if applicable.

Entity: \_\_\_\_\_  
Date(s) Served: \_\_\_\_\_ Office(s) Held: \_\_\_\_\_

Entity: \_\_\_\_\_  
Date(s) Served: \_\_\_\_\_ Office(s) Held: \_\_\_\_\_

Entity: \_\_\_\_\_  
Date(s) Served: \_\_\_\_\_ Office(s) Held: \_\_\_\_\_

Other community involvement:

**OPTIONAL**

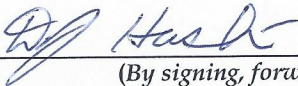
Please list additional information you would like considered, or you may attach your resume or other information.

Code of Virginia § 9.1-178 requires membership

Check this box if your resume is attached.

How did you hear about or who referred you to apply for appointment to this authority, board, commission or task force?

Rhonda Gilmer

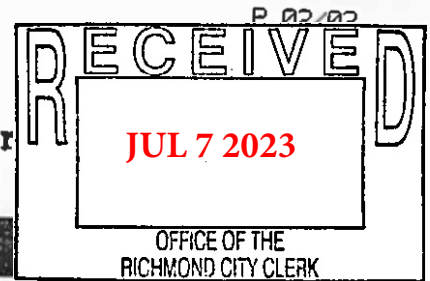
Signature:  Date: 14-June-23  
(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge)

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City of Richmond, Virginia  
City Council  
Authorities, Boards, Commissions and Task Force  
Reappointment Application



(Please Print or Type)

Name of Authority, Board, Commission or Task Force: **COMMUNITY CRIMINAL JUSTICE BOARD**

Title: Mr.  Mrs.  Ms.  Miss.  Dr.  Other: Judge

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Street Address: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Home City, Zip Code: \_\_\_\_\_ Home Fax: \_\_\_\_\_

Personal E-Mail Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Job Title: Judge, Richmond General District Court How Long? Aug 2020

Business Street Address: 400 N. 9th St. Business Telephone: \_\_\_\_\_

Business City, Zip Code: RVA 23219 Business Fax: \_\_\_\_\_

Business E-Mail Address: mshah@rva.courts.gov

Is your place of employment located in the city of Richmond? Yes  No

Is your place of employment located in the county? Yes  No  If yes, which county?

Are you a city resident? Yes  No  If yes, which City Council district? \_\_\_\_\_ Number of years? \_\_\_\_\_

Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes  No

If yes, please provide information on the nature of the contract.  
I believe so, but do not know nature / scope / details with any certainty.

Signature: \_\_\_\_\_ Date: 7/6/23

(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge.)

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# Richmond Ambulance Authority

*Vacancies as of  
November 12, 2023*

The Authority shall have **(11) eleven members**, two of whom shall be the **Chief Administrative Officer** and the **Director of Finance**, and one **City Council member**.

(8) members shall be appointed by the City Council for a term of two (2) years.

The Chief Administrative Officer and the Director of Finance shall serve during the time that they hold such offices.

Members of the Richmond Ambulance Authority must **either live or work in the city** as a condition of their membership. (Per opinion from City Attorney’s Office by e-mail dated August 7, 2017).

*(Assigned to the Public Safety Standing Committee)*

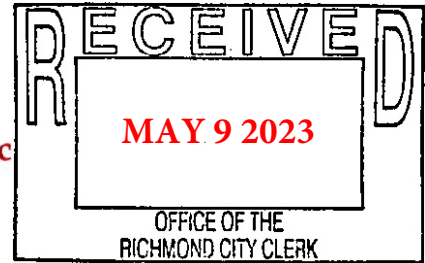
<b>Current Vacancies</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Matthew Conrad	Reside or work	7 <sup>th</sup>	Fourth	10/24/2023
			<i>Resigned</i>	
Julia Hammond	Reside or work	6 <sup>th</sup> District Employment	Second	09/09/2023
			<i>Application included</i>	
Kirk Roberts	Reside or work	4 <sup>th</sup>	First	10/23/2023
			<i>Application included</i>	
Marilyn West	Reside or work	3 <sup>rd</sup>	First	10/24/2023
			<i>Application included</i>	
<b>Current Membership</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
DeWitt C. Baldwin, III	Reside or work	2 <sup>nd</sup>	Second	01/09/2024
Carlos Hopkins	Reside or work	6 <sup>th</sup> District Employment	Second	11/28/2023
Lincoln Saunders	Chief Administrative Officer	6 <sup>th</sup> District Employment	First	Indefinite
Joseph Trapani	Reside or work	7 <sup>th</sup>	First	06/10/2025
Andrew Walker	Reside or work	9 <sup>th</sup> District Employment	First	10/23/2023
Shelia White	Director of Finance	6 <sup>th</sup> District Employment	First	Indefinite
Katherine Jordan	City Council Representative	2 <sup>nd</sup>	First	12/31/2024

**Contact:**

Richard “Chip” Decker,  
CEO, Richmond Ambulance Authority  
804-254-1180



City of Richmond, Virginia  
City Council  
Authorities, Boards, Commissions and Task Forces  
**Reappointment Application**



(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Richmond Ambulance Authority	
Title: Mr. <input type="checkbox"/> Mrs. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: <input type="checkbox"/>	
Last Name: Hammond	First Name: Julia
Home Street Address: 2021 Thornleigh Road	Home Telephone: (804) 305-1542
Home City, Zip Code: Midlothian, VA 23113	Home Fax:
Personal E-Mail Address:	
Employer: Cozen O'Connor Public Strategies	
Job Title: Gov't Relations Principal	How Long? 4 yrs.
Business Street Address: 1021 E. Cary St.	Business Telephone: (804) 762-6917
Business City, Zip Code: Richmond, VA 23219	Business Fax:
Business E-Mail Address: JHammond@cozen.com	
Is your place of employment located in the city of Richmond? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Is your place of employment located in the county? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which county?	
Are you a city resident? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, which City Council district? Number of years?	
Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please provide information on the nature of the contract.	
Signature: <u>Julia Hammond</u> Date: <u>05/09/2023</u>	
(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge.)	

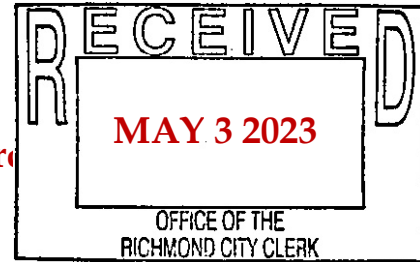
**NOTE: This application is a public document.**

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City of Richmond, Virginia  
City Council

Authorities, Boards, Commissions and Task Force  
**Reappointment Application**



(Please Print or Type)

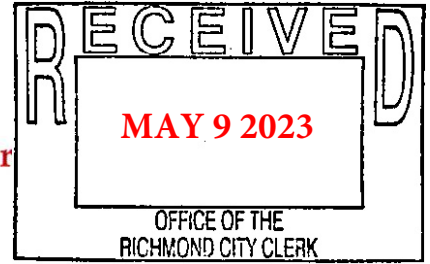
Name of Authority, Board, Commission or Task Force: Richmond Ambulance Authority	
Title: Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: <input type="checkbox"/>	
Last Name: Roberts	First Name: Kirk
Home Street Address: 8236 Barningham Rd	Home Telephone: (757) 592-0452
Home City, Zip Code: Richmond, VA 23235	Home Fax:
Personal E-Mail Address: kirksroberts@gmail.com	
Employer: CJGeo	
Job Title: Vice President	How Long? 21 years
Business Street Address: 3402 Acorn St #202	Business Telephone: (800) 428-5690
Business City, Zip Code: Williamsburg, VA 23188	Business Fax:
Business E-Mail Address: kirk@cjgeo.com	
Is your place of employment located in the city of Richmond? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Is your place of employment located in the county? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which county? James City	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 4 Number of years? 12	
Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please provide information on the nature of the contract.	
Signature: <u>Kirk Roberts</u> Date: <u>05/03/2023</u>	
(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge.)	

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**City of Richmond, Virginia**  
**City Council**  
**Authorities, Boards, Commissions and Task Force**  
**Reappointment Application**



(Please Print or Type)

Name of Authority, Board, Commission or Task Force:		Richmond Ambulance Authority	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input checked="" type="checkbox"/> Other: <input type="checkbox"/>			
Last Name: West		First Name: Marilyn	
Home Street Address: 1401 Wentbridge Rd		Home Telephone: (804) 337-7575	
Home City, Zip Code: Richmond, VA 23227		Home Fax:	
Personal E-Mail Address: mhwestcon@aol.com			
Employer: M.H. West & Co.			
Job Title: Chair & CEO		How Long? 32 yrs.	
Business Street Address: 1401 Wentbridge R.		Business Telephone: (804) 337-7575	
Business City, Zip Code: Richmond, VA 23227		Business Fax:	
Business E-Mail Address: mhwestcon@aol.com			
Is your place of employment located in the city of Richmond? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
Is your place of employment located in the county? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which county?			
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 3 Number of years?			
Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
If yes, please provide information on the nature of the contract.			
Signature: <u>Marilyn House West</u>		Date: <u>05/09/2023</u>	
(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge.)			

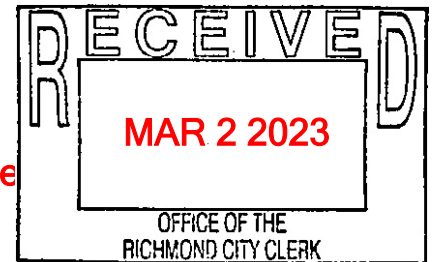
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City of Richmond, Virginia
City Council

Authorities, Boards, Commissions, and Task Force



(Name of Authority, Board, Commission or Task Force)

RICHMOND AMBULANCE AUTHORITY

Form fields for personal and business information: Title (Mr), Name (Mark P Hickman), Home Address (000403 S STAFFORD AVENUE), Home Telephone (8042184428), Personal E-Mail Address (hickmanmp@vcu.edu), Employer (Virginia Commonwealth University), Job Title (Senior Director, State Government Relations, VCUHS), Business Address (000830 E MAIN 25TH FLOOR), Business Telephone, Ext, Business Fax, Business E-Mail Address, Is Your Place of Employment Located in the city of Richmond? (Yes), Is your Place of Employment Located in the County? (No), Are You A City Resident? (Yes), If Yes, Which City Council District? (5), Number of Years? (15)

Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? No

If yes, please provide information on the nature of the contract.

Please List Your Educational Background and/or Other Expertise or Qualifications You Will Bring to This Authority, Board, Commission or Task Force:

As a senior member of the Office of VCU Government Relations where I primarily represent VCU Health System, I have knowledge of the critical relationship between emergency medical services (EMS) and the hospital, as well as the unique role of the Richmond Ambulance Authority (RAA). I am well positioned to facilitate and strengthen this relationship, serve the mission of RAA, and to fulfill all the duties of board membership.

I have extensive experience in health policy; local and state government and community affairs, and human services organizations. I have served on nonprofit boards and committees my entire adult career.

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City of Richmond, Virginia  
City Council

**Authorities, Boards, Commissions, and Task Forces Application**

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List other city of Richmond Authorities, Boards, Commissions or Task Forces you currently or have previously served on. Please give date(s) and office(s) held, if applicable.

*Clean City Commission, 2017-present*

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**Other Community Involvement:**

*Richmond Clean City Commission, 2017-present, Vice Chair, 2021-present  
Homeward Board of Directors, 2016-present, Vice Chair, 2022-present  
University of Richmond Jepson School Executive Board of Advisors, 2021-present  
Byrd Park Civic League, Vice President, 2021-present; Parks & Safety Chair, 2018-present,  
Past community leadership positions available upon request.*

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(OPTIONAL) Please List Additional Information You Would Like Considered, or You May Copy and Paste Your Short Resume.

*Resume available upon request.*

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How Did You Hear About or Who Referred You to Apply for Appointment to This Authority, Board, Commission or Task Force?

*Employer*

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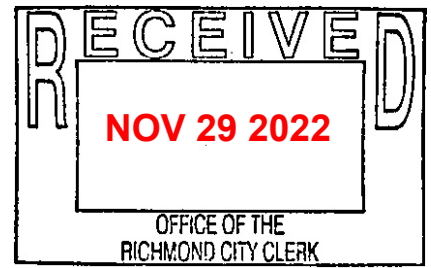
**NOTE: This application is a public document. Completed applications will remain on file for consideration for six (6) months at which time it must be updated.**





City of Richmond, Virginia  
City Council

**Authorities, Boards, Commissions and Task Forces  
Application**



(Name of Authority, Board, Commission or Task Force)

**RICHMOND AMBULANCE AUTHORITY**

Title: *RevMr*  
Name: *Peter J McCourt*  
Home Address: 000304 N SHEPPARD ST RICHMOND VA 23221  
Home Telephone: 8046909439 Home Fax:  
Personal E-Mail Address: Pmccourt@crstoreyrichmond.org  
Employer: Cristo Rey Richmond  
Job Title: President & CEO How Long?  
Business Address: 000304 N SHEPPARD ST RICHMOND VA 23221  
Business Telephone: 8044474704 Ext: 102 Business Fax:  
Business E-Mail Address: president@crstoreyrichmond.org  
Is Your Place of Employment Located in the city of Richmond  Yes  
Is your Place of Employment Located in the County?  No If Yes, Which County?  
Are You A City Resident?  No If Yes, Which City Council District? Number of Years?

Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment?  No

If yes, please provide information on the nature of the contract.

Please List Your Educational Background and/or Other Expertise or Qualifications You Will Bring to This Authority, Board, Commission or Task Force:

*BA, History & Political Science, Virginia Tech  
MTS, Word & Worship, Washington Theological Union  
MA, Theological Ethics, Washington Theological Union  
Graduate Certificate, Management, University of Notre Dame  
Graduate Certificate, Executive Integral Leadership, University of Notre Dame*

*Adjunct Professor of Religious Studies, Virginia Commonwealth University, 2003-2015, including courses on "Global Ethics and World Religions" and "Catholic Social Ethics"  
Vice President of Mission & Ethics, Bon Secours Virginia Medical Group, 2013-2018  
Ethics Committee, member, Bon Secours Richmond Health System, 2010-2018*

List other city of Richmond Authorities, Boards, Commissions or Task Forces you currently or have previously served on. Please give date(s) and office(s) held, if applicable.

*None*



City of Richmond, Virginia  
City Council

**Authorities, Boards, Commissions and Task Forces  
Application**

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**Other Community Involvement:**

*Clergy member, St. Mary's Catholic Church  
Graduate, Leadership Metro Richmond*

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**(OPTIONAL) Please List Additional Information You Would Like Considered, or You May Copy and Paste Your Short Resume.**

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**How Did You Hear About or Who Referred You to Apply for Appointment to This Authority, Board, Commission or Task Force?**

*1st District newsletter*

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Office of the City Clerk, 900 East Broad Street, Suite 200, Richmond, Virginia U.S.A. 23219  
Telephone: (804) 646-7955 \* Fax: (804) 646-7736  
[www.richmondgov.com/cityclerk](http://www.richmondgov.com/cityclerk)

# Advisory Board for the Assessment of Towing Fees and the Storage of Vehicles

*Vacancies as of  
November 12, 2023*

The Advisory Board for the Assessment of Towing Fees and the Storage of Vehicles shall have:

- (3) representatives of the Police Department
- (3) towing and recovery operators
- (1) member of the general public, who shall be a citizen of the City of Richmond to be appointed by Council.

Four members of the board shall constitute a quorum.

*(Assigned to the Public Safety Standing Committee)*

<b>Current Vacancies</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Darrell Goins	Police Department Representative	2 <sup>nd</sup> District Employment	First	03/22/2022
			<i>Contacted – no response received</i>	
<b>Current Membership</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Megan Amaya	Towing and Recovery Operator	8 <sup>th</sup> District Employment	Second	05/12/2025
Mathew Appelget	Citizen Member	3 <sup>rd</sup>	First	05/24/2026
Harold Giles	Police Department Representative	4 <sup>th</sup>	Second	09/09/2025
Captain Christopher Gleason	Police Department Representative	2 <sup>nd</sup> District Employment	First	05/12/2025
Ronda Lawson	Towing and Recovery Operator	8 <sup>th</sup> District Employment	First	06/10/2025
Charlie Woodson, Jr.	Towing and Recovery Operator	8 <sup>th</sup> District Employment	Second	05/24/2026

**Contact:**

Lynne Lancaster  
 City of Richmond- DPW/ Parking Division  
 900 E. Broad Street, Room 707  
 Richmond, VA 23219  
 804-646-6006  
[Lynne.Lancaster@Richmondgov.com](mailto:Lynne.Lancaster@Richmondgov.com)

# Capital Area Alcohol Safety Action Program (ASAP) Policy Advisory Board

*Vacancies as of  
November 12, 2023*

The Advisory Board shall consist of **sixteen (16) members**.

**Council appoints four (4) members to the Board.**

Hanover County Board of Supervisors appoints (2) members.

These six (6) board members select an additional ten (10) members.

*(Assigned to the Public Safety Standing Committee)*

<b>Current Vacancies</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Ashley Lockhart	Reside or work	2 <sup>nd</sup>	First	1/10/2023
			<i>Contacted – no response received</i>	
<b>Current Membership</b>				
Member Name	Criteria for Appointment	Live / Work District	Term	Terminate
Dr. A'tasha M Christian	Reside or work	7 <sup>th</sup> District Employment	First	3/26/2024
Andre Tolleris	Reside or work	5 <sup>th</sup>	First	1/28/2024
Jennifer VanCuyk	Reside or work	5 <sup>th</sup>	First	3/26/2024

**Contact:**

James Johnson, Executive Director,  
Capital Area Alcohol Safety Action Program (ASAP) Policy Advisory Board  
(804) 367 – 6090  
[caasap@aol.com](mailto:caasap@aol.com)