



Richmond City Council

Boards & Commissions
 Appointments & Reappointments

Formal Meeting of Richmond City Council
 Monday, November 14, 2016 – 6:00 p.m.

Organizational Development Standing Committee recommends appointment of the following applicants:

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>	<u>Terms</u>
Richmond Regional Planning District Commission (6 members and 1 alternate appointed by the city) (page 3)	Qualified voter and resident of the city of Richmond	Michael C. Gray (reappointment, page 4)	11/22/2016 – 11/22/2019
Affordable Housing Trust Fund Oversight Board (10 members) (page 5)	Representative of the Richmond Association of Realtors *	Jean Longest (reappointment, page 6)	11/14/2016 – 11/10/2019

Education and Human Services Standing Committee recommends appointment of the following applicants:

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>	<u>Terms</u>
Aging and Disabilities Advisory Board (9 members) (page 7)	Resident of the city who is a disabled person	Larry James Young, Jr. (reappointment, page 8)	11/14/2016 – 11/14/2019
	Representative of the business community	Bonnie Predd (reappointment, page 9)	12/09/2016 – 12/09/2019
	Resident of the city who is a senior citizen	A. Lynn Ivey (reappointment, page 10)	12/09/2016 – 12/09/2019

Land Use, Housing and Transportation Standing Committee recommends appointment of the following applicants:

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>	<u>Terms</u>
Clean City Commission (15 members) (page 11)	2 nd District qualified voter	Miriam Lack (reappointment, page 12)	01/28/2017 – 01/28/2019
	8 th District qualified voter	Catherine M. Welsh (reappointment, page 13)	01/28/2017 – 01/28/2019
	Corporate or citizen volunteer	Julian Gordon (reappointment, page 14)	01/28/2017 – 01/28/2019
		M. Jane Hotchkiss (reappointment, page 15)	01/28/2017 – 01/28/2019
Highway Safety Commission (12 members) (page 16)	Expertise in transportation safety *	Max Hepp-Buchanan (reappointment, page 17)	12/09/2016 – 12/09/2019

Land Use, Housing and Transportation Standing Committee recommends appointment of the following applicants:

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>	<u>Terms</u>
Board of Commissioners of the Richmond Redevelopment and Housing Authority (12 members) (page 18)	*	Robley Jones (reappointment, page 19)	01/12/2017 – 01/12/2021

Finance and Economic Development Standing Committee recommends appointment of the following applicants:

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>	<u>Terms</u>
Board of Directors of the Richmond Metropolitan Convention and Visitors Bureau (3 directors appointed by the city) (page 20)	*	Paige Bishop (reappointment, page 21)	01/01/2017 – 12/31/2019
		Jen Kostyniuk (page 22)	01/01/2017 – 12/31/2019 <i>Succeeding Iris E. Holliday, resigned</i>

Public Safety Standing Committee recommends appointment of the following applicants:

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>	<u>Terms</u>
Advisory Board for the Assessment of Towing Fees and the Storage of Vehicles (7 members) (page 24)	Towing and recovery operator *	Orlando S. Orefice, Jr. (page 25)	11/14/2016 – 05/24/2019 <i>Succeeding Gordon S. Burke, no longer eligible</i>
Capital Area Alcohol Safety Action Program Policy Advisory Board (4 members appointed by Council) (page 27)	*	K. Scott Miles (reappointment, page 28)	01/10/2017 – 01/10/2020

Governmental Operations Standing Committee recommends appointment of the following applicants:

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>	<u>Terms</u>
City Personnel Board (10 members) (page 29)	City resident	Joshua L. Mathews-Ailsworth (page 30)	01/10/2017 – 01/10/2020 <i>Succeeding Jeffon T. Neal, not eligible for reappointment</i>
		Betty L. Squire (reappointment, page 32)	01/10/2017 – 01/10/2020
	Member of the classified service of the city of Richmond appointed on an interim basis pending the completion of the election process for which Res. No. 2007-R122-111 calls	David Kilmon (page 33)	Commencing 11/14/2016 and terminating upon the appointment of a classified employee as successor following the completion of the election process for which Resolution No. 2007-R122-111 calls.

Richmond Regional Planning District Commission

Vacancy Chart

As of
February 12, 2017

Four (4) elected officials of the governing body (City Council); **one** member of the **City Planning Commission**; **one** qualified voter and resident of the city of Richmond; **one** alternate member may be appointed – He/she may be an elected official or any citizen of Richmond.

(Assigned to the Organizational Development Standing Committee)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Michael C. Gray	All Members of Council	11/22/2016	Yes	Application included	Qualified voter and resident of the city of Richmond

Contact:

Julie Fry, Executive Secretary
Richmond Regional Planning District Commission
367-6001

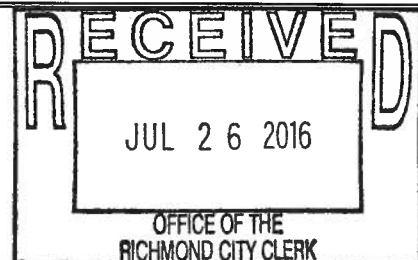


City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Richmond Regional Planning District Commission	
Title: Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Gray	First Name: Mike
Home Street Address: 4807 Augusta Avenue	Home Telephone: 804-357-1670
Home City, Zip Code: Richmond, Virginia 23230	Home Fax:
Personal E-Mail Address: mgray@cpgroupllc.com	
Employer: Commonwealth Partnerships Group	
Job Title: Partner	How Long? 7 years
Business Street Address: 7113 Three Chopt Road	Business Telephone: 804-354-0964
Business City, Zip Code: Richmond, Virginia 23226	Business Fax:
Business E-Mail Address: mgray@cpgroupllc.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? Henrico	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 1 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? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please provide information on the nature of the contract. 	
Signature: Michael C. Gray	Date: 7/26/2016
<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>	

NOTE: This application is a public document.



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Affordable Housing Trust Fund Oversight Board

Vacancy Chart

As of
February 12, 2017

The board shall consist of ten members, each of whom shall either reside in the city of Richmond or have a principal place of employment within the city of Richmond. One member shall be selected from each of the following categories:

- (1) A representative from Richmonders Involved to Strengthen our Communities.
- (2) A resident of the city of Richmond or a representative of a service provider assisting low-income individuals or families.
- (3) A representative from the Richmond Association of Realtors.
- (4) A representative from an organization dedicated to promoting affordable housing.
- (5) A lender from a financial institution with affordable housing financing experience.
- (6) A builder or developer with experience constructing housing projects.
- (7) A representative of the Richmond Redevelopment and Housing Authority.
- (8) An attorney specializing in housing matters.
- (9) A housing counselor.
- (10) A member of City Council, who shall be a non-voting member of the board.

Of the ten members, the City Council shall appoint six members, including the members designated in subdivisions (1) through (4) and (9) and (10). The mayor, by a writing submitted to the City Clerk, shall appoint four members, including the members designated in subdivisions (5) through (8).

(Not yet assigned to a standing committee)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Linda Melton	Mayor	02/06/2017	Yes	Mayor's Office Notified	(5)
Jean Longest	All members of Council	11/10/2016	Yes	Application included	(3)

Contact:

Cybelle McDaniels, Board Analyst

Cybelle.mcdaniels@richmondgov.com or 804-646-5713

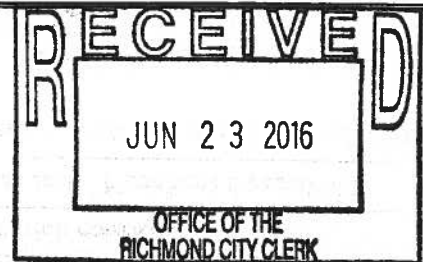


City of Richmond, Virginia

City Council

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Affordable Housing Trust Fund Oversight Board	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Longest	First Name: Jean
Home Street Address: 1136 West Avenue	Home Telephone: 804-353-9829
Home City, Zip Code: Richmond, Virginia 23220	Home Fax: _____
Personal E-Mail Address: jean.longest@longandfoster.com	
Employer: Long and Foster	
Job Title: Real Estate Broker	How Long? 35 years
Business Street Address: 409 Strawberry Street	Business Telephone: 804-873-5036
Business City, Zip Code: Richmond, Virginia 23220	Business Fax: 804-340-0841
Business E-Mail Address: jean.longest@longandfoster.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 checked="" 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? 2nd Number of years? 45	
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>Jean M. Longest</u>	Date: <u>May 20, 2016</u>
<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>	



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Aging and Disabilities Advisory Board

Vacancy Chart

as of

February 12, 2017

The Board shall be composed of nine (9) members nominated and appointed by the Council.

Of the nine members:

- A. 1 - member shall be a representative of the business community with primary residence or principal place of business located within the city of Richmond,
- B. 2 - members shall be city residents/disabled persons,
- C. 2 - members shall be city residents/senior citizens,
- D. 1 - member shall be either a member of the Council or a City employee,
- E. 1 - member shall be city resident/caregiver of at least one disabled person,
- F. 1 - member shall be a caregiver of at least one senior citizen and
- G. 1 - member shall be either an attorney or paralegal (i) whose firm or office routinely represents or handles cases for senior citizens or disabled persons, (ii) who has experience addressing issues related to the American with Disabilities Act and (iii) who shall not be required to be a resident of or have a principal place of business in the city.

The Board may elect from its membership a chairman and other officers it deems necessary in accordance with its rules of procedure or bylaws.

This board has not yet been assigned to a standing committee.

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
A. Lynn Ivey	All members of Council	12/09/2016	Yes	Application included	F
Bonnie Predd	All members of Council	12/09/2016	Yes	Application included	A
Larry James Young, Jr.	All members of Council	11/11/2016	Yes	Application included	B
Linda Broady-Myers	All members of Council	05/02/2016	No	Resigned	C

Contact:

Paul Manning, Chief Service Officer, Neighbor-to-Neighbor Initiative

Human Services

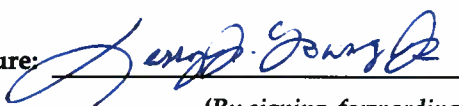
804-646-6528

Paul.manning@richmondgov.com

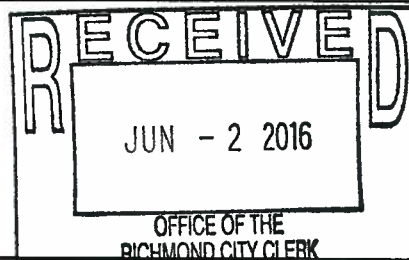


City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Aging and Disabilities Advisory Board	
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: YOUNG JR.	First Name: LARRY
Home Street Address: 4100 NARBETH AVE.	Home Telephone: (804) 248-3028
Home City, Zip Code: RICHMOND, 23234	Home Fax:
Personal E-Mail Address: mog1983va@gmail.com	
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 checked="" 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: 	Date: 6/2/16
(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.)	

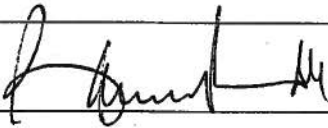
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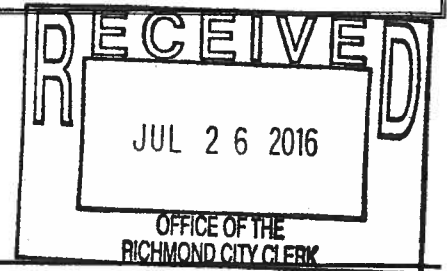


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City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Aging and Disabilities Advisory Board	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Predd	First Name: Bonnie
Home Street Address: 406 N Allen Ave	Home Telephone: 425-246-4898
Home City, Zip Code: Richmond VA 23220	Home Fax: N/A
Personal E-Mail Address: bonniepredd@aol.com	
Employer: United Methodist Family Services	
Job Title: HR Assistant/Part Time	How Long? 3+ years
Business Street Address: 3900 W Broad St	Business Telephone: 804-353-4461
Business City, Zip Code: Richmond VA 23230	Business Fax: N/A
Business E-Mail Address: bpredd@umfs.org	
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 checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 2 Number of years? 3+	
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. N/A	
Signature: 	Date: 07-26-16
<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>	



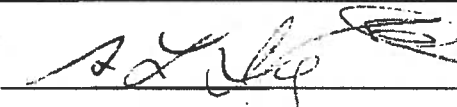
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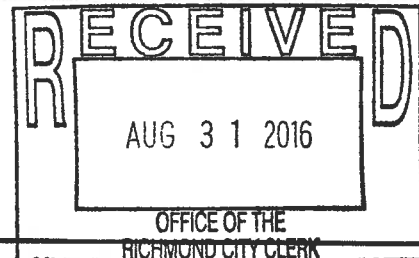
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City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Aging and Disabilities Advisory Board	
Title: Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Ivey	First Name: Alphonso
Home Street Address: 729 South Pine St.	Home Telephone: 804-303-1661
Home City, Zip Code: Richmond, 23220	Home Fax:
Personal E-Mail Address: Millynnium@comcast.net	
Employer: HomeKeepers LLC	
Job Title: Principal	How Long? 4 years
Business Street Address: 8501 Patterson Ave.	Business Telephone: 804-750-1166
Business City, Zip Code: Richmond, 23229	Business Fax:
Business E-Mail Address: Lynn@HomeKeepers.org	
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? Henrico	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 5 Number of years? 10	
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: 	Date: August 31, 2016
<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>	



NOTE: This application is a public document.

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Clean City Commission

Vacancy Chart

As of
February 12, 2017

Fifteen (15) members appointed by Council, of which nine (9) members shall be from among the eligible voters within each voting district, five (5) members shall be corporate/citizen volunteers, one (1) member shall be the Director of Public Works, or his designee.

The Commission shall have five subcommittees as follows:

- Communications
- Schools
- Business and Industry
- Community Organizations
- Municipal Operations

(Assigned to the Land Use, Housing & Education Standing Committee)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Miriam Lack	All members of Council	01/28/2017	Yes	Application included	2 nd District qualified voter
Barbara Branch	All members of Council	01/28/2016	Yes	No	7 th District qualified voter
Catherine Welsh	All members of Council	01/28/2017	Yes	Application included	8 th District qualified voter
Julian Gordon	All members of Council	01/28/2017	Yes	Application included	Corporate/citizen volunteer
M. Jane Hotchkiss	All members of Council	01/28/2017	Yes	Application included	Corporate/citizen volunteer

Contact:

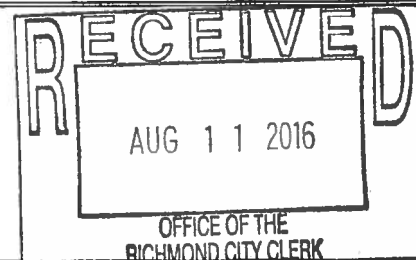
Darlene Mallory, Support Services Mgr./Clean City Commission Coordinator
Department of Public Works
3506 N. Hopkins Road
646-8325



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: Clean City Commission	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: <input type="checkbox"/>	
Last Name: Lach	First Name: Miriam Lach
Home Street Address: 107 N Shields Ave	Home Telephone: 804 579-0057
Home City, Zip Code: RVA 23226	Home Fax: 804 358-9182
Personal E-Mail Address: Jeffrichmond222@gmail.com	
Employer: Windsor Memory Care	
Job Title: Receptionist	How Long? 12 years
Business Street Address: 3600 Grove Ave	Business Telephone: 804 353-3886
Business City, Zip Code: RVA 23220	Business Fax: 804 358-9182
Business E-Mail Address:	
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? 20 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: Miriam M Lach	Date: 8-12-2016
(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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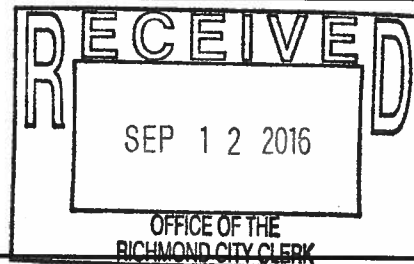


City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Clean City Commission	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Welsh	First Name: Catherine
Home Street Address: 3610 S. Belmont Rd	Home Telephone: 804-745-1512
Home City, Zip Code: Richmond	Home Fax:
Personal E-Mail Address: welshcm@verizon.net	
Employer: Retired	
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 checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 8 Number of years? 35	
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: Catherine M. Welsh Date: 9/12/16	
<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>	

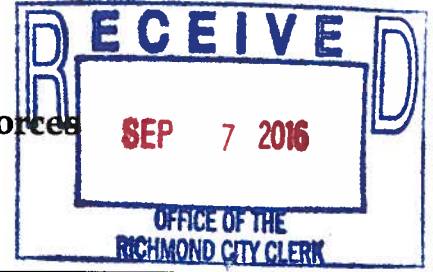
NOTE: This application is a public document.



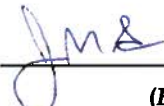
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City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application



(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Clean City Commission	
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: Gordon	First Name: Julian
Home Street Address: 3600 W Broad St Unit 319	Home Telephone: 804-852-6031
Home City, Zip Code: Richmond, VA 23230	Home Fax:
Personal E-Mail Address: jgordon@alumni.vcu.edu	
Employer: Pristine Services	
Job Title: Operations Manager	How Long? 11 yrs
Business Street Address: 14133 Mountain Road	Business Telephone: 804-798-5880
Business City, Zip Code: Glen Allen, VA 23059	Business Fax:
Business E-Mail Address: julian@pristineservicesinc.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 checked="" type="checkbox"/> If yes, which county? Hanover	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 2nd Number of years? 11 yrs	
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: 	Date: 9/7/2016
<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>	

NOTE: This application is a public document.

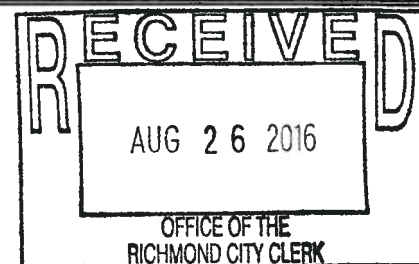
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City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Clean City Commission	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other:	
Last Name: Hotchkiss	First Name: M. Jane
Home Street Address: 2420 Floyd Avenue	Home Telephone: 804-355-4836
Home City, Zip Code: Richmond, VA 23220	Home Fax:
Personal E-Mail Address: jhotchkiss2@netzero.net	
Employer: Retired	
Job Title: N/A	How Long? N/A
Business Street Address: N/A	Business Telephone: N/A
Business City, Zip Code: N/A	Business Fax: N/A
Business E-Mail Address: N/A	
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 checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 2nd Number of years? 30	
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>M. Jane Hotchkiss</u> Date: <u>August 23, 2016</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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Highway Safety Commission

Vacancy Chart

as of

February 12, 2017

The commission shall be composed of 12 members as follows:

- (1) A member of the Council.
- (2) Four qualified voters of the city who hold no office of profit with the city.
- (3) Three members with expertise in transportation safety.
- (4) The superintendent of the School Division of the city of Richmond.
- (5) The commanding officer of the Traffic Division of the Department of Police.
- (6) The traffic engineer of the city.
- (7) The director of Public Works.

(Assigned to the Land Use, Housing & Education Standing Committee)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Max Hepp-Buchanan	All members of Council	12/31/2016	Yes	Application included	Expertise in transportation safety
James Johnson	All members of Council	12/31/2016	Yes	Contacted. No response received.	Expertise in transportation safety

Contact:

Travis Bridewell, Operations Manager – Traffic Engineering
Department of Public Works
646-5745

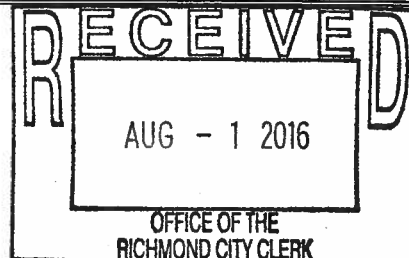


City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Richmond Highway Safety Commission	
Title: Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Hepp-Buchanan	First Name: Max
Home Street Address: 3607 Moss Side Ave	Home Telephone: 804-625-6120
Home City, Zip Code: Richmond, VA 23222	Home Fax:
Personal E-Mail Address: max.hepp.buchanan@gmail.com	
Employer: Sports Backers	
Job Title: Director of Bike Walk RVA	How Long? 3+ years
Business Street Address: 100 Avenue of Champions, Suite 300	Business Telephone: 804-285-9495
Business City, Zip Code: Richmond, VA 23230	Business Fax: 804-285-3132
Business E-Mail Address: max@sportsbackers.org	
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 checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 3 Number of years? 3+ 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 checked="" type="checkbox"/> No <input type="checkbox"/> If yes, please provide information on the nature of the contract. Sports Backers has a sports tourism contract with the City of Richmond.	
Signature: Max Hepp-Buchanan	Date: 08-01-2016
<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>	

NOTE: This application is a public document.



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Richmond Redevelopment and Housing Authority

Vacancy Chart

as of

February 12, 2017

Section 5.05(d) of the Charter of the City of Richmond (2006) expressly provides that “the appointment of members of a redevelopment and housing authority in the city shall be made by the council.” Section 36-11 of the Code of Virginia (1950) authorizes the Council to provide for not more than nine or less than five commissioners of the Authority. By Resolution No. 99-R46-80, adopted March 22, 1999, the Council increased the number of commissioners from five to seven as authorized by section 36-11 of the Code of Virginia (1950). Resolution No. 2010-R140-162, adopted October 25, 2010, increased the number of commissioners from seven to nine with the addition of a Council-appointed seat and an additional tenant representative seat.

Pursuant to section 36-11 of the Code of Virginia (1950), no commissioner of the Authority may be an officer or employee of the City. By Resolution No. 2003-R230-2004-R18, adopted January 12, 2004, the Council established a procedure to be followed for appointing one member living in public or assisted housing to serve on the Authority’s Board of Commissioners as required by the regulations of the United States Department of Housing and Urban Development. This resolution was further amended by Resolution No. 2010-R141-173, adopted November 8, 2010, which revised the process of appointing the tenant representatives to the board.

(Assigned to the Land Use, Housing & Transportation Standing Committee)

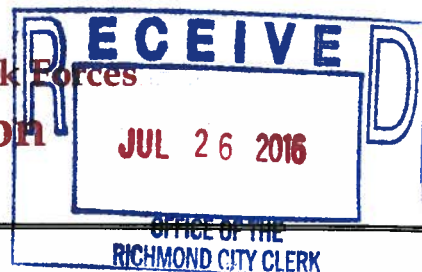
Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Robley Jones	All members of Council	01/12/2017	Yes	Application included	Reside or work in the city

Contact:

Priscilla Jackson, Executive Administrative Assistant
Richmond Redevelopment & Housing Authority (RRHA)
804-780-4246



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: <i>Richmond Redevelopment and Housing Authority</i>	
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: <i>Jones</i>	First Name: <i>Robley</i>
Home Street Address: <i>4112 Springhill Avenue</i>	Home Telephone: <i>804-233-3748</i>
Home City, Zip Code: <i>Richmond 23225</i>	Home Fax: <input type="checkbox"/>
Personal E-Mail Address: <i>robleyj@aol.com</i>	
Employer: <i>Retired (effective 9/1/16)</i>	
Job Title: <input type="checkbox"/>	How Long? <input type="checkbox"/>
Business Street Address: <input type="checkbox"/>	Business Telephone: <input type="checkbox"/>
Business City, Zip Code: <input type="checkbox"/>	Business Fax: <input type="checkbox"/>
Business E-Mail Address: <input type="checkbox"/>	
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? <input type="checkbox"/>	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? <input type="checkbox"/> Number of years? <input type="checkbox"/>	
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. <input type="checkbox"/>	
Signature: <i>Robley Shelton Jones</i>	Date: <i>7/26/16</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.)	

NOTE: This application is a public document.

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Richmond Metropolitan Convention and Visitors Bureau

Vacancy Chart

As of
February 12, 2017

The membership of the corporation shall consist of one or more classes of members. The initial Class A Membership shall consist of the City of Richmond, each of the Counties of Chesterfield, Hanover, Henrico and New Kent, the Greater Richmond Chamber and the Retail Merchants Association.

Board of Directors - Ex-officio voting directors of the corporation: (A) the President of the Greater Richmond Chamber; (B) the President of the Retail Merchants Association; (C) the President of the Hotel/Motel Association (a division of the Retail Merchants Association); (D) the President of the Virginia Tourism Corporation; (E) the President and Chief Executive Officer of the Capital Region Airport Commission; (F) the General Manager of King's Dominion; (G) the President of Richmond International Raceway, Inc.; (H) the Executive director of Venture Richmond; and (I) the Executive Director of Richmond Sports Backers: (iii) one director appointed by the Museum Directors Association; and (iv) one at-large director appointed by the Board of Directors of the corporation.

The City of Richmond shall appoint three (3) directors.

(Assigned to the Finance & Economic Development Standing Committee)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Paige Bishop	All members of Council	11/22/2016	Yes	Application Included	Reside or work in the city
Iris Holliday	All members of Council	10/25/2016	No	Resigned	Reside or work in the city

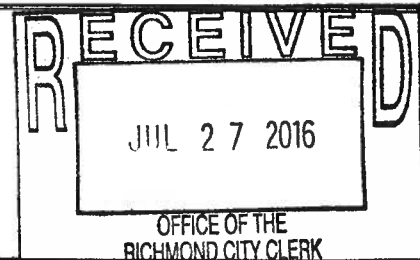
Contact:
Michelle Lovatt
Director of Administration
Richmond Metropolitan Convention & Visitors Bureau
783-7401



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: <i>Richmond Region Tourism - Richmond Metro Convention & Visitors Bureau</i>	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: <input type="checkbox"/>	
Last Name: <i>Bishop</i>	First Name: <i>Paige</i>
Home Street Address: <i>7507 Turf Lane</i>	Home Telephone: <i>240-888-9933</i>
Home City, Zip Code: <i>Richmond 23225</i>	Home Fax: <input type="checkbox"/>
Personal E-Mail Address: <i>ypbishop@gmail.com</i>	
Employer: <i>Northwestern Mutual</i>	
Job Title: <i>Chief Marketing Officer</i>	How Long? <i>2 years</i>
Business Street Address: <i>3901 Westerre Parkway, Suite 300</i>	Business Telephone: <i>804-346-5466</i>
Business City, Zip Code: <i>Richmond, Va 23233</i>	Business Fax: <input type="checkbox"/>
Business E-Mail Address: <i>paige.bishop@nm.com</i>	
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? <i>Henrico</i>	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? <i>4th</i> Number of years? <i>8</i>	
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><i>Paige Bishop</i></u> Date: <u><i>7-27-16</i></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.

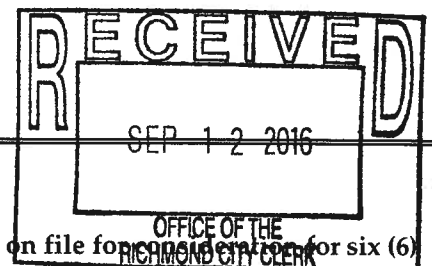
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City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Richmond Region Tourism Board of Directors	
Title: Mr. <input type="checkbox"/> Mrs. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Kostyniuk	First Name: Jen
Home Street Address: 12003 Burrard Court	Home Telephone: 804-310-4776
Home City, Zip Code: Henrico, 23233	Home Fax:
Personal E-Mail Address: jkostyniuk@verizon.net	
Employer: Dominion Resources, Inc.	
Job Title: Director, Dominion Energy Communications	How Long? 3 months
Business Street Address: 707 E. Main Street, 19 th Floor	Business Telephone: 804-771-3176
Business City, Zip Code: Richmond, 23219	Business Fax:
Business E-Mail Address: jen.kostyniuk@dom.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.	
Please list your educational background and/or other expertise or qualifications you will bring to this authority, board, commission or task force: In my formal role as Manager, Regional, State and Local Affairs at Dominion, I was very involved with the City of Richmond and other counties in the Greater Richmond Metro area. In addition, I am graduate of the Lead Virginia program and Leadership Metro Richmond. I am very knowledgeable about RRT and its mission. Also, I am proud of my VCU education: Master of Arts, May 2003, Major: English – Writing and Rhetoric Master of Science, May 1997, Major: Mass Communications – Media Management Bachelor of Science, May 1995, Major: Mass Communications – Advertising	



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

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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:

I currently serve as a board member for Art 180, Greater Richmond Stop Child Abuse Now (SCAN), Partnership for the Future and Rx Partnership.

OPTIONAL

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

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?

Iris Holliday

Signature: Jen Kostyniuk Date: 09/12/2016

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

Vacancy Chart

as of
February 12, 2017

The Advisory Board for the Assessment of Towing Fees and the Storage of Vehicles shall have three (3) representatives of the Police Department, three (3) towing and recovery operators, and one (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)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Gordon Burke	All members of Council	05/24/2016	No	No longer eligible	Towing and recovery operator
Kevin Conner	All members of Council	05/24/2016	Yes	Contacted. No response received.	Towing and recovery operator

Contact:

Lt. John Beazley
200 W. Grace St.
Richmond, Va. 23220
804-646-6726 (w)
John.beazley@richmondgov.com

To: 2309377

From: (804)6467736

08/12/16 09:45 AM

Page 2 of 3



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

(Please Print or Type)

Name of Authority, Board, Commission or Task Force:
Advisory Board for the Assessment of Towing Fees and the Storage of Vehicles

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

Last Name: DREFFE First Name: ORLANDO S. JR

Home Street Address: 8625 DEVARA CT Home Telephone: 330 0339

Home City, Zip Code: RICHMOND VA 23235 Home Fax:

Personal E-Mail Address:

Employer: National Adjustment Services Inc

Job Title: President How Long? 30 years

Business Street Address: 168 E. Belt Blvd Business Telephone: 231-9268

Business City, Zip Code: Richmond VA 23224 Business Fax: 230 9377

Business E-Mail Address: NAS.Recovery@ADL.COM

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

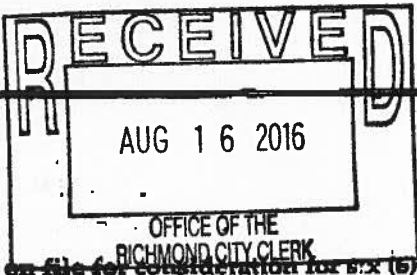
Is your place of employment located in the county? Yes No If yes, which county?

Are you a city resident? Yes No If yes, which City Council district? 8 Number of years? 30 yrs

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:
I have worked in Richmond for 59 years - U of R (1957)
Been involved with towing and recovery for 61 years. Have held management positions at Southern Bank and Bank of Virginia



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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:

My wife is a certified Hospice Volunteer. She works every Sunday at Retreat for Sick on Grove Ave. Also an advocate for animal rights. We have rescued untold numbers of Dogs and cats over the years

OPTIONAL

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

I have trained hundreds of people at Bank of Virginia - worked there for 15 years. We volunteer each Christmas by serving Christmas Dinner to our Police Dept. (2nd Prec.) for those Police Officers who are on duty. I have done this for a number of years

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? *Mr. Rex Trammell*

Signature: *Arlando S. Creprie Jr* Date: *August 15, 2016*

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

Vacancy Chart

as of
February 12, 2017

The Advisory Board shall consist of sixteen (16) members. City of Richmond - 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)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Kelly Miles	All members of Council	01/10/2017	Yes	Application included	Reside or work in the city

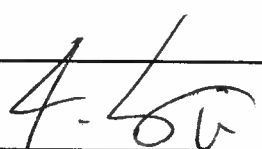
Contact:

*James Johnson, Executive Director,
Capital Area Alcohol Safety Action
Program (ASAP) Policy Advisory Board
804-367-6090*

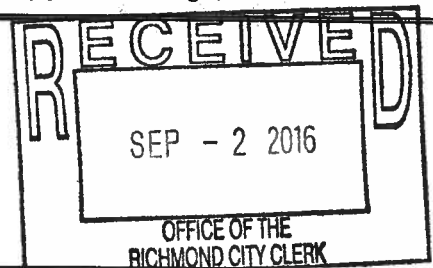


City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Capital Area Alcohol Safety Action Program Policy Advisory Board	
Title: Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Miles	First Name: K. Scott
Home Street Address: 1422 Nottoway Avenue	Home Telephone: (804) 317-7565
Home City, Zip Code: Richmond, VA 23227	Home Fax:
Personal E-Mail Address: k.scott.miles@gmail.com	
Employer: self	
Job Title: Attorney	How Long? 19 years
Business Street Address: 9512 Ironbridge Rd., Suite 205	Business Telephone: (804) 232-4313
Business City, Zip Code: Chesterfield, VA 23832	Business Fax: (888) 317-4313
Business E-Mail Address:	
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? Chesterfield	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? 3 Number of years? 19	
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: 	Date: 9/1/2016
<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>	

NOTE: This application is a public document.



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City Personnel Board

Vacancy Chart

as of

February 12, 2017

Ten (10) persons appointed by the Council who reside within the City, except that Board members who are members of the classified system of the City shall not be subject to this section's residency requirement. Two (2) members of the Board shall be members of the classified service nominated by the members thereof in a manner prescribed by the Council.

(Assigned to the Governmental Operations Standing Committee)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Jeffon Neal	All members of Council	01/10/2017	No	-	City resident
Betty Squire	All members of Council	01/10/2017	Yes	Application included	City resident
Carl Jackson	All members of Council	09/01/2016	No	Resigned	Member of the classified service of the city of Richmond

Contact:

Veronica Kenner
Personnel Board Secretary
Department of Human Resources
646-5862



City of Richmond, Virginia
City Council

Authorities, Boards, Commissions and Task Forces Application

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

CITY PERSONNEL BOARD

Title: _____
Name: *Joshua L Mathews-Ailsworth*
Home Address: 003121 MONTROSE AVE RICHMOND VA 23222
Home Telephone: 7578188459 Home Fax: _____
Personal E-Mail Address: ailswojl@dukes.jmu.edu
Employer: Virginia Commonwealth University Health System
Job Title: Consultant How Long? _____
Business Address: 000830 MAIN ST RICHMOND VA 23219
Business Telephone: _____ Ext: _____ Business Fax: _____
Business E-Mail Address joshua.mathewsailsworth@vcuhealth.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? Yes 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:

Background in human resource development and management. Prior experience serving on a city commission.

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.

Master of Science in Education (M.S.Ed.) in Adult Education/Human Resource Development, Certified Manager (CM) through Institute of Certified Professional Managers.

Other Community Involvement:

Not Applicable.

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



City of Richmond, Virginia
City Council

Authorities, Boards, Commissions and Task Forces Application

Previously served on Parks & Recreation Commission for City of Harrisonburg, Virginia. Previous experience volunteering coaching youth sports in Harrisonburg, Virginia

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

PROFESSIONAL SUMMARY

Certified Manager with experience in higher education, long-term care, and aca

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.

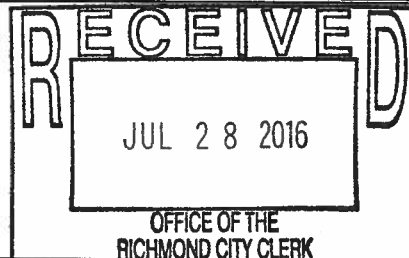


City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Personnel Board	
Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Squire	First Name: Betty
Home Street Address: 1600 N. 27 th St.	Home Telephone: 804-225-8331
Home City, Zip Code: Richmond, VA 23223	Home Fax: N/A
Personal E-Mail Address: bett1705@aol.com	
Employer: Retired	
Job Title: N/A	How Long? N/A
Business Street Address: N/A	Business Telephone: N/A
Business City, Zip Code: N/A	Business Fax: N/A
Business E-Mail Address: N/A	
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 type="checkbox"/> No <input checked="" 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? 7th Number of years? 33yrs	
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>Betty L. Squire</u> Date: <u>7/28/16</u>	
<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>	

NOTE: This application is a public document.



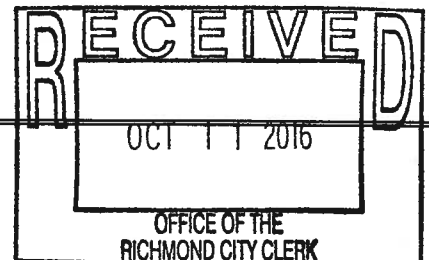
Office of the City Clerk, 900 East Broad Street, Suite 200, Richmond, Virginia U.S.A. 23219
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www.richmondgov.com/cityclerk



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

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: Personnel Board	
Title: Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	
Last Name: Kilmon	First Name: David
Home Street Address: 2405 Sunnybrook Rd	Home Telephone: 804 357-9095
Home City, Zip Code: Henrico, 23294	Home Fax:
Personal E-Mail Address: dwk1@hotmail.com	
Employer: City of Richmond, Richmond Public Library	
Job Title: Library Associate 1	How Long?
Business Street Address: 101 E. Franklin St	Business Telephone: 804 646-7223
Business City, Zip Code: Richmond, 23219	Business Fax:
Business E-Mail Address: David.Kilmon@richmondgov.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 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 type="checkbox"/> 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: Education: Bachelor of Science Business Major in Business Administration and Management from VCU Committee: VCU Paramedic Advisory Committee -- Public Member (Active)	



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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.

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?

Signature: David W. Kilmon Date: October 6, 2016

(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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