

## City of Richmond, Virginia Public Art Commission

(Please Print or Type)

Other:

Title: Mr. Mrs. Ms. Miss. Dr. Other:		
Last Name: FLOWERS	First Name: GARY	
Home Street Address: 2907 BROOK ROAD Home Telephone: 804. 321,601		Home Telephone: 804. 321.60(3
Home City, Zip Code: RICHMOND, VH 23220		Home Fax:
Personal E-Mail Address: Gary & gary flowers. com		
Employer: SELF-EMPLOYED		
Job Title: N/A		How Long?
Business Street Address: N/A		Business Telephone:
Business City, Zip Code: N/A		Business Fax:
Business E-Mail Address: N/A		
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		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 P		
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 the Public Art Commission:		
AS A PRODUCT OF THE RICHMOND PUBLIE SCHOOLS I EXCELLED		
IN FINE ACTS (1.2. pointing, wire sculpture, wood work). I SERVED ON ADVISORY COUNTLY FOR THE MARTIN L. KING WE MORTAL AND BENJAMIN BANEKER AND DR. CARTER G. WOODSON MEMORTALS THE WASHINGTON .DC, 'AS WELL AS MAGGLE TVALKER STATUETA PICHIUM,		
WAS HINGRON, DL, 'AS WEL	L AS MACGE	E OVALLER STATUE IN RICHINGING
NOTE: This application is a public document.		



## City of Richmond, Virginia Public Art 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.		
Entity:		
Date(s) Served: Office(s) Held:		
Entity:		
Date(s) Served: Office(s) Held:		
Entity:  Date(s) Served:  Office(s) Held:		
Date(s) Served: Office(s) Held:		
Other community involvement:		
HTSTORIC JACKSON WARD ASSOCIATION (PAST VICE PRES.)		
THEBAN BENEFICIAL CLUB		
SIGNA SI PHI FRATERATIY, INC		
OMEGA BI PHI FRATERNITY, INC.		
RICHMOND SYMPHONY BOARD		
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 the Public Art Commission?  MS. ELLYN PARKER		
MES SARAH CLINNINGHAM		
Signature: Date: APRTL 22, 2019		
(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)		
my or manufacture for consideration is time and accurate to the best by your knowledge)		

NOTE: This application is a public document.