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## Profile

\_\_\_\_\_  
Prefix      Heidi      \_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name      \_\_\_\_\_  
Margulis      Suffix

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Suite or Apt

\_\_\_\_\_  
City

State

\_\_\_\_\_  
Postal Code

\_\_\_\_\_  
Email Address

Humana Inc. \_\_\_\_\_  
Employer

Health Care Executive \_\_\_\_\_  
Occupation

### What district do you live in? \*

District 8

\_\_\_\_\_  
Primary Phone

\_\_\_\_\_  
Alternate Phone

### Interests \*

Public Health

### Volunteer Activities

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### Which Boards would you like to apply for?

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Board of Health: Submitted

### Past Service on City and County boards and Commissions?

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Yes  No

### If Yes, Please List

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Years ago under Mayor Harvey Sloane

**Are you employed by Louisville Metro Government?**

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Yes  No

**Do you or a member of your immediate family have ownership interest in any company that does business with Louisville Metro Government?**

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Yes  No

**Do you or a member of your immediate family have ownership interest in any property that is the subject of a condemnation proceeding, planning and zoning proceeding or any other administrative or court proceeding in which Louisville Metro Government or its agencies are interested parties?**

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Yes  No

**Do you have any contract or matter pending before any Louisville Metro Government agency?**

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Yes  No

**Have you ever been sued by the former City of Louisville, Jefferson County or Louisville Metro Government?**

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Yes  No

**Additional Notes**


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Upload a Resume

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**Background Check**

  
Please enter the last four digits of your social security number. This is protected and will not be shared.

I authorize Louisville Metro Government and the Administrative Office of the Courts to search public records for any relevant information regarding me.

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Yes  No

n/a

Please enter Maiden/Previous Names, if applicable.

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## Demographics

### Ethnicity \*

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Caucasian/Non-Hispanic

### Political Party \*

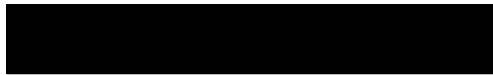
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Democrat

### Gender \*

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Female



Date of Birth

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