

GREG FISCHER
MAYOR

April 13, 2015

Mr. David Tandy, President Metro Council 601 West Jefferson Street Louisville, KY 40202

Dear President Tandy:

In accordance with the Parkland Neighborhood Plan Advisory Group Ordinance, I am appointing the following to the Parkland Neighborhood Plan Advisory Group.

Name		Term
Ameerah Granger	New Appointment	April 30, 2016
Steven Kelsey	New Appointment	April 30, 2016
Harvetta Ray	New Appointment	April 30, 2016
Dwight Sweeney	New Appointment	April 30, 2016
Michael Thomas, Sr.	New Appointment	April 30, 2016
Charles Weathers	New Appointment	April 30, 2016
Kevin Wigginton	New Appointment	April 30, 2016

Metro Council approval of this appointment is not required.

Greg Fischer

Sincerely,

Mayor

cc: Councilwoman Julie Denton

## Parkland Neighborhood Plan Advisory Group

Appointment	Term	MC Dist.	Race	Gender	Party
Ameerah Granger	4/30/2016	1	AA	F	D
Steven Kelsey	4/30/2016	1	AA	M	D
Harvetta Ray	4/30/2016	1	AA	F	D
Dwight Sweeney	4/30/2016	1	AA	М	D
Michael Thomas, Sr.	4/30/2016	1	AA	М	D
Charles Weathers	4/30/2016	1	AA	М	D
Kevin Wigginton	4/30/2016	1	AA	M	D

Council Approval	No
Term	1 Year
Auto Reappointment	No
Revised	4/9/2015

Submit Date: Apr 09, 2015 Status: submitted

Prefix	Ameerah First Name	Granger Last Name	Suffix	;
Street Address City			Suite or Apt State	Postal Code
Email Address				
JCPS Employer		Community Outreach/Social Work Occupation		
District 1 What district do	you live in?			
Primary Phone		Alternate Phone		
Interests	*			
Codes Econo Histori Housin Human Informa Land D Neighb Public Public Public Recrea	n Resources ation Technology Development porhoods Health Safety Utilities ation mmunications ortation			
Volunteer	Activities			

Which Boards would you like to apply for?
Parkland Neighborhood Plan Advisory Group
Past Service on City and County boards and Commissions?
○ Yes   No
If Yes, Please List
Please answer the following questions. If you answer yes, please include relevant details (i.e. position, company, address, dates, etc.) in the Additional Notes section below.
Are you employed by Louisville Metro Government?
Yes      No
Do you or a member of your immediate family have ownership interest in any company that does business with Louisville Metro Government?
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?
Yes      No
Do you have any contract or matter pending before any Louisville Metro Government agency?
○ Yes   No

Have you ever been sued by the former City of Louisville, Jefferson County or Louisville Metro Government?
○ Yes   No
Additional Notes
Upload a Resume
Background Check
We require a criminal background check for all appointed members.
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.
Please enter Maiden/Previous Names, if applicable.
Demographics
Some boards and commissions require membership to be racially, politically or geographically proportionate to the general public. Please complete the information requested below.
African American
Ethnícity
Democrat  Rolling Lady
Political Party
Female  Gender



Date of Birth

## Submit Date: Apr 09, 2015 Status: submitted

Prefix	Steven First Name	Kelsey	Suff	ix
Street Address City			Suite or Apt State	Postal Code
Email Address				
New Beg Education Employer	nnings Counseling n Center	Licensed Mental Health Counselor Occupation		
District 1 What district d	o you live in?			
Egy Maria				
Primary Phone	All Allering days of the Control of	Alternate Phone		
Interests	; *			
Codes Econo Histor Housin Huma Inform Land I Neigh Public Public Recre	n Resources ation Technology Development borhoods Health Safety Utilities ation mmunications oortation			
Voluntee	r Activities			

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00.40
8246 Please enter Maiden/Previous Names, if applicable.
Demographics
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African American
Ethnicity
Democrat Political Party
Political Party
Male Gender
Octique



Date of Birth

**Volunteer Activities** 

### Submit Date: Apr 09, 2015 Status: submitted

Prefix	Ray First Name	Harvetta  Last Name	Suffix	
Street Address City			Suite or Apt State	Postal Code
Email Address				
Employer	nolar House	Social Worker Occupation		
Other What district do	you live in?			
Primary Phone		Alternate Phone	93	
Interests	*			
Codes/ Econor Historic Housing Human Informa Land D Neighb Public I Public I Public I Recrea	Resources tion Technology evelopment orhoods Health Safety Utilities			

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Yes      No
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O Yes ● No

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○ Yes ○ No
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African American
Ethnicity
Democrat
Political Party
Female
Gender



Date of Birth

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**Application Form** 

## **Profile** Dwight Sweeney First Name Prefix Last Name Suffix Street Address Suite or Apt Postal Code State City Email Address U Rent It Owner Employer Occupation District 1 What district do you live in? Primary Phone Alternate Phone Interests \* ☐ Business Development ☐ Codes/Regulations ☐ Economic Development ☐ Historical Preservation Housing ☐ Human Resources ☐ Information Technology ☐ Land Development □ Neighborhoods ☐ Public Health ☐ Public Safety ☐ Public Utilities ☐ Recreation □ Telecommunications ☐ Transportation Zoning **Volunteer Activities**

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○ Yés ○ No
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African American
Ethnicity
Democrat
Political Party
Male
Gender



Date of Birth

Submit Date: Apr 09, 2015 Status: submitted

Michael Prefix First Name	Thomas  Last Name	Sr Suffix	_
Street Address		Suite or Apt	
			100
City	See 1	State	Postal Code
Email Address			
retired - Ford Motor Co			
Employer	Occupation		
District 1 What district do you live in?			
Primary Phone	Alternate Phone		
Interests *			
□ Business Development □ Codes/Regulations □ Economic Development □ Historical Preservation □ Housing □ Human Resources □ Information Technology □ Land Development □ Neighborhoods □ Public Health □ Public Safety □ Public Utilities □ Recreation □ Telecommunications □ Transportation □ Zoning			

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African American
Ethnicity
Democrat Political Party
Male  Gender

.



Date of Birth

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Charles Prefix First Name	Weathers Last Name	Suffix	
Street Address		Suite or Apt	
City		State	Postal Code
Email Address			
Metro Council Employer	Admin Assist. for District 1 Occupation		
What district do you live in?			
A STATE OF THE STA			
Primary Phone	Alternate Phone		
Interests *			
Business Development Codes/Regulations Economic Development Historical Preservation Housing Human Resources Information Technology Land Development Neighborhoods Public Health Public Safety Public Utilities Recreation Telecommunications Transportation Zoning		il.	

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Yes ○ No
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African American
Ethnicity
Democrat Political Party
Male
Gender



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Prefix	Kevin First Name	Wigginton  Last Name	Suffix	
			I SKC-1	
Street Address			Suite or Apt	8
City			State	Postal Code
Contract of the second				
Email Address				
JCPS		Teacher		
Employer		Occupation		
District 1				
What district do	you live in?			
Value of the last		Variable Control of the Control of t		
Primary Phone		Alternate Phone		
Interests	*			
	ss Development			
	/Regulations mic Development			
	cal Preservation			
☐ Housir				
	Resources			
	ation Technology			
	Pevelopment			
	orhoods			
☐ Public☐ Public				
	Utilities			
Recrea				
Teleco	mmunications			
	ortation			
☐ Zoning				
Volunteer	Activities			

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