Submit Date: Dec 01, 2016 Status: submitted

Profile

	Travis	Yates		
Prefix	First Name	Last Name	Suffix	
		The state of the s		
Street Addres	S		Suite or Apt	and the same of th
		The second secon		AND THE PROPERTY OF THE PROPER
City			State	Postal Code
Constitution of the last				
Email Address	6			
Beacon/s	SOCAYR Property			
Manager	ment	President/CEO		
Employer		Occupation		
District 6				
What district of	lo you live in?			
CONTRACTOR OF THE PARTY OF THE				
Primary Phon	9	Alternate Phone		
Interest	s *			
✓ Busir	ness Development			
✓ House	ing			
✓ Neigl	nborhoods			
Volunte	er Activities			
Which E	Boards would you like to	apply for?		
Affordab	le Housing Trust Fund Boa	rd		
Past Service on City and County boards and Commissions?				
Yes	O No			

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If Yes, Please List
AHTF
Are you employed by Louisville Metro Government?
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?
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

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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.

Total on passio rotor as for any rotorant information rogaranty mor			
○ Yes ○ No			
Please enter Maiden/Previous Names, if applicable.			
Demographics			
Caucasian/Non-Hispanic Ethnicity			
Independent			
Political Party Male			
Gender Date of Birth			

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