Profile

| Ms Prefix | Mary First Name | Hart Last Name | Suffix | |
|-------------------------|----------------------------|---------------------------------------|-----------------------|---------------------|
| W 0250 W | | | | |
| Street Address | | | Suite or Apt State | |
| City | | | | Postal Code |
| Email Address | | | | |
| JCPS Employer | | Teacher Occupation | | |
| What dis | strict do you live in? * | | | |
| □ Districe | et 22 | | | |
| Comment of | | | | |
| Primary Phone Interests | | Alternate Phone | | |
| | | | | |
| Public | : Health | | | |
| Voluntee | er Activities | | | |
| Kentuckia Society | ana Girl Scouts Kentucky E | Beekeepers Association Louisville Eth | nnic Dancers L | Louisville Dulcimer |
| Which B | oards would you like to | apply for? | | |
| Waste Ma | anagement District 109 Bo | ard: Submitted | | |
| Past Ser | vice on City and Count | y boards and Commissions? | | |
| o Yes | No | | | |

Submit Date: Jun 01, 2017

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| Are you employed by Louisville Metro Government? | | | | |
|--|--------------|--|--|--|
| ○ Yes ○ No | | | | |
| Do you or a member of your immediate family have ownership interest in any codoes business with Louisville Metro Government? | ompany that | | | |
| C Yes ⊙ No | | | | |
| Do you or a member of your immediate family have ownership interest in any pairs the subject of a condemnation proceeding, planning and zoning proceeding administrative or court proceeding in which Louisville Metro Government or its interested parties? | or any other | | | |
| C Yes ⊙ No | | | | |
| Do you have any contract or matter pending before any Louisville Metro Governagency? | nment | | | |
| C Yes ⊙ No | | | | |
| Have you ever been sued by the former City of Louisville, Jefferson County or L Metro Government? | -ouisville | | | |
| C Yes ⊙ No | | | | |
| Additional Notes | | | | |
| | | | | |
| Mary_Susan_Hart.docx | | | | |
| 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.

| garang men | | | | |
|--|--|--|--|--|
| ⊙ Yes ○ No | | | | |
| Mary Susan Dunn | | | | |
| Please enter Maiden/Previous Names, if applicable. | | | | |
| Demographics | | | | |
| Ethnicity * | | | | |
| ✓ Caucasian/Non-Hispanic | | | | |
| Political Party * | | | | |
| ✓ Democrat | | | | |
| Gender * | | | | |
| ▼ Female | | | | |
| | | | | |
| Date of Birth | | | | |
| | | | | |

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