## **Profile**

	lester	turner, jr			
Prefix	First Name	Last Name		Suffix	
			Control of the second		
Street Address	No. of the last of		Suite or Apt		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1000 1000 1000	State		
City				Postal Code	
G-250-50					
Email Address	The second secon				
self-emplo	yee	real estate broker			
Employer		Occupation			
What dis	rict do you live in? *				
□ District	5				
THE TOTAL STREET					
Primary Phone		Alternate Phone			
Interests	*				
Zoning					
Voluntee	r Activities				
Which Bo	pards would you like to	apply for?			
Board of Z	oning Adjustment: Appoin	ted			
Past Service on City and County boards and Commissions?					
Past Serv	rice on City and County	boards and Commissions?			
o Yes o	No				
If Yes, Pl	ease List				

Submit Date: Jun 21, 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 company that does business with Louisville Metro Government?
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
Board_of_Zoning.docx
Upload a Resume

## **Background Check**



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

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search public records for any relevant information regarding me.			
⊙ Yes ○ No			
Please enter Maiden/Previous Names, if applicable.			
Demographics			
Ethnicity *			
✓ African American			
Political Party *			
Gender *			
✓ Male			
Date of Birth			

I authorize Louisville Metro Government and the Administrative Office of the Courts to

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