	Aug	EORGIA		
Clerk of Commission				
Commission, Authorities, & Boards Talent Bank Application				
Title	Mr.			
First Name *	Donald			
Middle Name *	n/a			
Last Name *	Dorr			
Suffix				
Date Of Birth *	7/16/1959			
Address*	Street Address 3905 Beacon Pl Address Line 2			
	City	State / Province / Region		
	Augusta Postal / Zip Code	Country		
	30906	United States		
Home Phone *	7062318326			
Work Phone				
Registered Voter*	 District 1 District 3 District 5 District 7 None 	 District 2 District 4 District 6 District 8 		
Marital Status *	Married			
Education *	College Degree			
Race*	Black			
Gender *	Male			
Occupation *	retired			
Interests				
Commissions, /	Authorities, & Boards			
Volunteer For*	Augusta Canal Authority			

*	I currently have relatives working for the City of Augusta		
) Yes	No	
*	I currently serve on an Augusta Board, Commission, or Authority		
) Yes	No	
	I would like to receive an email confirmation of my submission.		
	Yes	No	
Email	dmix952@protonmail.com		