



Kathleen Toomey, M.D., M.P.H., Commissioner

Brian Kemp, Governor

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www.ecphd.com

MEMORANDUM

TO: Lena Bonner
Clerk of Commission

FROM: Marcia Bowers *MBowers*
Executive Assistant

DATE: November 19, 2024

SUBJECT: Board of Health Reappointments

At the November 12, 2024 Board of Health Meeting, a motion was passed to submit the following names to the Commission to consider for Board reappointments:

- Merian Robinson, RPh, (Seat #4) - (Represents: Physician appointed by the Augusta RC Commission.) Her seat is a 4-year term.
- Deborah H. Presnell (Seat #5) – (Represents: Member appointed by the Augusta RC Commission.) Her seat is a 4-year term.
- D. Ronald Spearman, MD, (Seat #8) - (Represents: Member-at-large appointed by the Augusta RC Commission.) His seat is a 4-year term.

Please place on your next Commission's agenda. Enclosed are *Talent Bank Information Questionnaires* for each and a Composition of the Richmond County Board of Health.

Thank you.

Enclosures

xc: Dr. Thomas Kiernan, BOH Chairman
Dr. Lee Donohue
Commissioner Tony Lewis

East Central Health District

Lee Donohue, MD, FACP, District Health Director

We protect lives.

TALENT BANK INFORMATION QUESTIONNAIRE

TO BE COMPLETED BY PERSONS DESIRING TO VOLUNTEER THEIR SERVICES ON THE RICHMOND COUNTY BOARD OF HEALTH
AUTHORITY, BOARD OR COMMISSION FOR AUGUSTA, GEORGIA

NOTE: ANY INFORMATION ENTERED ON THIS QUESTIONNAIRE WOULD BECOME PUBLIC INFORMATION UPON YOUR
SUBMISSION/APPOINTMENT.

EMAIL ADDRESS: merian.robinson@yahoo.com

DATE: March 10, 2017

1. NAME: Merian R Robinson

HOME PHONE: 706-284-6409 BUS. PHONE: n/a

2. HOME ADDRESS: 1306 Jamaica Court Richmond Georgia 30909
STREET COUNTY STATE ZIP

3. DATE OF BIRTH: December 9, 1947 SEX: MALE _____ FEMALE X

4. REGISTERED VOTER: YES X NO _____

5. VOTING DISTRICT 10th

6. MARITAL STATUS: SINGLE _____ MARRIED _____ SEPARATED _____
ENGAGED _____ DIVORCED X

7. EDUCATION: HIGH SCHOOL Lucy C Laney High School
COLLEGE Morris Brown College Florida A and M University

8. RELATIVES WORKING FOR THE COUNTY: none

9. OCCUPATION: Registered Pharmacist

10. RACE: WHITE _____ AFRICAN-AMERICAN X ASIAN AMERICAN _____

SPANISH SURNAMED _____ AMERICAN INDIAN _____ OTHER (specify) _____

11. LIST BOARDS YOU PRESENTLY SERVE ON:

1. Richmond County Board of Health

12. LIST ANY AREA IN WHICH YOU HAVE A PARTICULAR INTEREST OR EXPERTISE.

1. All areas having to do with drugs and their destruction.

2. Public relations representative for the health department in meeting the needs of children (health related)
in low income neighborhoods

3. Working with the Emergency Management team

TALENT BANK INFORMATION QUESTIONNAIRE

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NOTE: ANY INFORMATION ENTERED ON THIS QUESTIONNAIRE WOULD BECOME PUBLIC INFORMATION UPON YOUR SUBMISSION/APPOINTMENT.

EMAIL ADDRESS: deb.presnell@gmail.com

DATE: 1/1/19

1. NAME: Deborah H. Presnell

HOME PHONE: 706-394-8472 ^{Home} BUS. PHONE: 706-849-1058

2. HOME ADDRESS: 324 Broad St. Augusta, Ga. 30901

STREET COUNTY STATE ZIP

3. DATE OF BIRTH: 2-18-51 SEX: MALE _____ FEMALE ☒

4. REGISTERED VOTER: YES ☒ NO _____

5. VOTING DISTRICT At 1, May Park

6. MARITAL STATUS: SINGLE _____ MARRIED ☒ SEPARATED _____

ENGAGED _____ DIVORCED _____

7. EDUCATION: HIGH SCHOOL _____
COLLEGE B.S. Environmental Health, M.S.P.H.

8. RELATIVES WORKING FOR THE COUNTY: NONE

9. OCCUPATION: retired - public health administrator

10. RACE: WHITE ☒ AFRICAN-AMERICAN _____ ASIAN AMERICAN _____

SPANISH SURNAMED _____ AMERICAN INDIAN _____ OTHER (specify) _____

11. LIST BOARDS YOU PRESENTLY SERVE ON: _____

1. St. Luke UMC trustee

2. _____

3. _____

12. LIST ANY AREA IN WHICH YOU HAVE A PARTICULAR INTEREST OR EXPERTISE.

Environmental Hlth / Public Health Advocacy

TALENT BANK INFORMATION QUESTIONNAIRE

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AUTHORITY, BOARD OR COMMISSION FOR AUGUSTA, GEORGIA

NOTE: ANY INFORMATION ENTERED ON THIS QUESTIONNAIRE WOULD BECOME PUBLIC INFORMATION UPON YOUR
SUBMISSION/APPOINTMENT.

EMAIL ADDRESS: Spearmanmcd@aol.com

DATE: 1/24/2022

1. NAME: D. Ronald Spearman, MD

HOME PHONE: 706-294-1217 BUS. PHONE: 706-294-1217

2. HOME ADDRESS: 48 Conifer Circle, Richmond GA 30909

STREET COUNTY STATE ZIP

3. DATE OF BIRTH: 12/30/1949 SEX: MALE ☒ FEMALE ☐

4. REGISTERED VOTER: YES ☒ NO ☐

5. VOTING DISTRICT 7 (705)

6. MARITAL STATUS: SINGLE ☐ MARRIED ☒ SEPARATED ☐

ENGAGED ☐ DIVORCED ☐

7. EDUCATION: HIGH SCHOOL ☐

COLLEGE B.S. - Morehouse College, M.D. - Medical College of Georgia

8. RELATIVES WORKING FOR THE COUNTY: N/A

9. OCCUPATION: Physician

10. RACE: WHITE ☐ AFRICAN-AMERICAN ☒ ASIAN AMERICAN ☐

SPANISH SURNAMED ☐ AMERICAN INDIAN ☐ OTHER (specify) ☐

11. LIST BOARDS YOU PRESENTLY SERVE ON:

1. Medical College of Georgia Foundation - Board of Directors

2. Board of Trustees - Bethel AME Church

3. _____

12. LIST ANY AREA IN WHICH YOU HAVE A PARTICULAR INTEREST OR EXPERTISE.

Internal Medicine - Primary Care
