Augusta GEORGIA

## **Clerk of Commission**

Commission, Authorities, & Boards Talent Bank Application

Title	Dr.	
First Name*	Onnie	
Middle Name*	Payne	
Last Name*	Poe	
Suffix		
Date Of Birth *	8/31/1979	
Address*	Street Address 4101 Foreman Way Address Line 2 City	State / Province / Region
	Hephzibah Postal / Zip Code 30815	GA Country USA
Home Phone*	706-294-5105	
Work Phone		
Registered Voter*	<ul> <li>District 1</li> <li>District 3</li> <li>District 5</li> <li>District 7</li> <li>None</li> </ul>	<ul><li>District 2</li><li>District 4</li><li>District 6</li><li>District 8</li></ul>
Marital Status*	Married	
Education*	Doctorate Degree	
Race*	Black	
Gender*	Female	
Occupation*	Educator	
Interests	Mental Health, Disabilities, Youth, Educati	ion,

## Commissions, Authorities, & Boards

Volunteer For\* Housing and Community Development Citizens Advisory Board Click add below to apply for more than one board.

Volunteer For*	Citizen Engagement Focus Group Click add below to apply for more than one board.	
Volunteer For*	CSRA Economic Opportunity Authority, Inc. Click add below to apply for more than one board.	
*	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	Onnie@fillinginthegaps.net	