## Clerk of Commission

Commission, Authorities, & Boards Talent Bank Application

Title

Dr.

First Name\*

Marshall

Middle Name\*

David

Last Name\*

Bedder

Suffix

Date Of Birth\*

5/25/1955

Address\*

Street Address

81 Bristlecone Ln

Address Line 2

City

State / Province / Region

Augusta

GA

Postal / Zip Code

Country

30909

USA

Home Phone\*

360-930-1955

Work Phone

Registered Voter\*

District 1

District 2

District 3

District 4

District 5 District 7 District 6 District 8

None

Marital Status\*

Married

Education\*

Doctorate Degree

Race\*

White

Gender\*

Male

Occupation\*

Associate Professor and Founding Director of HRSA funded Addiction medicine

Fellowship MCG

Interests

Community Health issues, County Cultural fulfillment

Commissions, Authorities, & Boards

Volunteer For\*

Citizen Engagement Focus Group

# Clerk of Commission

Commission, Authorities, & Boards Talent Bank Application

Title	Ms.	
First Name *	Jessie	
Middle Name*	Pollard	
Last Name *	Cunningham	
Suffix		
Date Of Birth*	11/22/1962	
Address*	Street Address 1837 Beaver Creek lane Address Line 2 City Hephzibah Postal / Zip Code 30815	State / Province / Region Ga Country Richmond
Home Phone *	7064956567	
Work Phone	8032322832	
Registered Voter*	District 1 District 3 District 5 District 7 None	District 2 District 4 District 6 District 8
Marital Status*	Single	
Education*	High School	
Race*	Black	
Gender*	Female	
Occupation*	QA/ inspector	
Interests	House Authority Board	

## Commissions, Authorities, & Boards

Volunteer For \* Augusta Housing Authority

# Clerk of Commission

Commission, Authorities, & Boards Talent Bank Application

Title	Dr.	
First Name *	Lily	
Middle Name *	Jung	
Last Name*	Henson	
Suffix		
Date Of Birth *	11/24/1962	
Address*	Street Address 1350 Walton Way Address Line 2	
	City	State / Province / Region
	Augusta	Georgia
	Postal / Zip Code	Country United States
	30901	United States
Home Phone*	4042762318	
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*	Doctorate Degree	
Race*	Asian	
Gender*	Female	
Occupation*	Physician, Hospital CEO	
Interests		

Commissions, Authorities, & Boards

Volunteer For\*

Richmond County Opioid Advisory Committee

#### Clerk of Commission

Commission, Authorities, & Boards Talent Bank Application

Title	Dr.	
First Name*	Ralph	
Middle Name*	D.	
Last Name *	Turner	
Suffix		
Date Of Birth*	1/15/1968	
Address*	Street Address 4205 Ascot Ct Address Line 2	
	City Evans	State / Province / Region
	Postal / Zip Code 30809	Country United States
Home Phone*	6085166499	
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*	Doctorate Degree	
Race*	Black	
Gender*	Male	
Occupation*	Hospital Administration	
Interests	golf	

## Commissions, Authorities, & Boards

Volunteer For \* Richmond County Opioid Advisory Committee

# Clerk of Commission

Commission, Authorities, & Boards Talent Bank Application

Title		
First Name*	Caroline	
Middle Name *	Teer	
Last Name*	Yort	
Suffix		
Date Of Birth *	6/5/1965	
Address*	Street Address 3025 Lake Forest Dr Address Line 2 City Augusta Postal / Zip Code 30909	State / Province / Region GA Country United States
Home Phone *	7063945546	
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*	White	
Gender*	Female	
Gender* Occupation*	Retmired	

### Commissions, Authorities, & Boards

Volunteer For\*

Richmond County Opioid Advisory Committee