



Ray O'Connell, Mayor
City of Allentown
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TO: Michael Hanlon
City Clerk

FROM: Ray O'Connell *ROC*
Interim Mayor

DATE: December 11, 2019

SUBJECT: Authorities, Boards, Commissions Appointments

Mayor O'Connell has approved the following reappointment for City Council's consideration.

<u>Name</u>	<u>Authority/Board/Commission</u>	<u>Term to Expire</u>
Dr. Paul K. Gross	Health Board	01/01/2025

Dr. Gross is currently a member of the Health Board. I have attached his resume for your consideration. Thank you.

ROC/kal

Attachments

REQUEST FOR APPOINTMENT**DATE**

12/6/09

AUTHORITY, BOARD OR COMMISSION YOU ARE REQUESTING APPOINTMENT TO: ALLENTOWN HEALTH BUREAU BOARD OF HEALTH**NAME:** PAUL GROSS**HOME ADDRESS:** 205 N. 28th St Allentown PA 18104**BUSINESS ADDRESS:** 401 N. 17th St ALLENTOWN PA 18104**TELEPHONE NO. (RESIDENCE)** 610-433-2887 **BUSINESS** 610-820-9900**EMAIL:** PGROSS@yahoo.com**PRESENTLY EMPLOYED BY:** Self.**JOB TITLE:** Physician**EMPLOYMENT (Prior):** Same**EDUCATION:****HIGH SCHOOL GRADUATE:****COLLEGE OR UNIVERSITY GRADUATE****DEGREE/FIELD OF STUDY**YESNOYESNOMD**CURRENT MEMBERSHIP IN ORGANIZATIONS AND OFFICES:**Lehigh Valley HospitalSacred Heart HospitalSaint Luke's HospitalALLENTOWN ASSOCIATES

**PAST ORGANIZATIONAL MEMBERSHIP AND OFFICES
HELD:** _____

DO YOU LIVE IN THE CITY OF ALLENTOWN: ☒ **YES** ☐ **NO**

**DO YOU HAVE A SIGNIFICANT "BUSINESS" OR "PROPERTY" INTEREST IN
ALLENTOWN? PLEASE EXPLAIN:**

Lehigh Center Chapel Research

ARE YOU A REGISTERED VOTER: ☒ **YES** ☐ **NO**

**WHY ARE YOU INTERESTED IN THIS APPOINTMENT? BE SURE TO INCLUDE
WHAT VALUE YOU WILL BRING TO THE BOARD:**

Outgoing Member

**DO YOU ANTICIPATE A CONFLICT OF INTEREST BY SERVING AS A MEMBER
OF AN AUTHORITY, BOARD OR COMMISSION:** ☐ **YES** ☒ **NO**

**IF YES,
EXPLAIN:** _____

**IF YOU ARE BEING CONSIDERED FOR REAPPOINTMENT, PLEASE INDICATE
HOW MANY TERMS YOU HAVE SERVED _____ AND THE YEAR YOU
WERE FIRST APPOINTED _____.**

NOTE: This information will be used for making appointments to authorities, boards and commission and in the event you are appointed/reappointed, it may be used as a news release to identify you to the community.

Signature

Date

Please forward this request for appointment, along with a resume to:

**Mayor's Office
City Hall
435 Hamilton Street
Allentown, PA 18101**