OFFICE OF THE MAYOR

BOARDS AND COMMISSIONS APPLICATION

REGISTERED VOTER: YES X NO _____
PARTY AFFILIATION: (Unaffiliated)
U.S. CITIZEN: YES X NO _____
NAME: Judith H. Rothschild Esq.
ADDRESS: 80 Washington Street Hartford, CT 06106
E-MAIL ADDRESS: judith.rothschild@ct.gov
TELEPHONE: HOME: (Private) OFFICE: 860-756-7810
CELL: (Private)
DATE OF BIRTH: 01/24/1960
EMPLOYMENT: State of CT Division of Criminal Justice, Office of the Chief State's Attorney - Housing Bureau
BOARD AND/OR COMMISSION OF INTEREST:
Lead Advisory Committee

PLEASE LIST THREE (3) CHOICES:

Lead Advisory Committee (only)*

* Filling the role of representative from the State Attorney's office. Thank you.

I HEREBY ACKNOWLEDGE THE ABOVE TO BE TRUE

Judith H Rothschild
SIGNATURE

10/13/2022
DATE