Lowndes County Board/Agency Appointee Information Sheet - Submission #143

Date Submitted: 8/18/2023

Date:	Board/Agency Applying	g For:	
8/18/2023	Lowndes County Board	l of Health	
Last Name		First Name	
Johnson		Anthony	
Street Address		City/State/Zip	
		Valdosta, GA 31601	//
Phone Number		Email Address	
			//
Occupation			
Family Medicine Physic	ian		
			//
Professional Experien			
Family Medicine- 8 year Environmental Health-			
Knowledge & Skills			
Experience in both Env	ironmental Health and Family Me	ledicine	
What knowledge or skill appointed?	s do you possess that would con	ntribute to the Board/Agency to which you are requesting to	be
Please list the Board/A	Agency that you have been or a	are currently a member of:	
American Board of Fan	nily Medicine		
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