Print

Lowndes County Board/Agency Appointee Information Sheet - Submission #186

Date Submitted: 5/15/2025

Date:	Board/Agency Applyi	ng For:	
5/15/2025	Valdosta Lowndes cou	unty Airport Authority	
Last Name		First Name	3
Hogan		Ben	
Street Address		<u>/</u>	City/State/Zip
			Valdosta/GA/31605
Phone Number		Email Add	ress
Occupation			
Physician			
Professional Experience)		
24 years in private praction	e and as private business ow	ner; Pilot	
Knowledge & Skills			
Business and Aviation Kn	owledge and Experience		
What knowledge or skills appointed?	do you possess that would co	ontribute to the Boar	d/Agency to which you are requesting to be
Please list the Board/Aç	ency that you have been or	r are currently a me	ember of:
Extra Activities & Comn	nunity Organizations		
Team Physician at Valdo Valwood Football	sta State University; firmer tea	am physician for Val	dosta City Schools; former Volunteer Coach for
Please list any extraourric	ular activities and/or commun	nity organizations vo	u are affiliated with