

Staff Use Only:

Council District

19

This application is a

Reappointment

New Appointment

GREENVILLE COUNTY SPECIAL TAX DISTRICT APPLICATION

Buxton

An individual may only apply to serve on one board or commission during any election cycle.

In order for your application to be given consideration, it is critical that you answer all of the following questions as completely as possible.

Mr Mrs Ms Miss David Spear

Home Address 5 Wallingford Road City Greenville

Zip 29609 Home Phone _____ Work Phone _____

Voter Registration Number _____ Email _____

****You must be registered to vote in Greenville County at the time of application**

Occupation Professor

Employer Furman University

Employer Address

3300 Poinsett Highway

Greenville, SC 29613

Volunteer Experience

Have served on the Buxton Tax Commission board for one year. Prior to that I was on the Buxton Homeowners Association.

Do you currently hold any elected or appointed office or commission Yes

If yes, list Have served on the Buxton Tax Commission board for one year.

Have you ever been fined for any ethics violations? No

If so, please comment _____

Describe your understanding of the role of a member of the board or commission to which you are applying _____

The Commission meets on an as needed basis to keep tax income in line with community expenditures.

What specific skills do you believe you could contribute as a member of this board or commission? _____

Have served on the Buxton Tax Commission board for one year. Prior to that I was on the Buxton Homeowners Association.

Have you ever been convicted of a crime other than a minor traffic violation?

Yes

No

Do you, any member of your family or a business with which you or a member of your family is associated, provide goods and/or services to this board for payment?

Yes

No

Statement

By my signature, I state that all information contained in this application is true and accurate to the best of my knowledge.

I understand it is my responsibility to insure my application is submitted within the application period and that it has been received by the County Council Office.

I understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.

Signature _____

Date _____

Recommended by _____

Please return completed form to:

**Greenville County Council
301 University Ridge, Suite 2400
Greenville, SC 29601-3665**

If you have questions, please call 467-7115 or check the www.greenvillecounty.org website.