Staff Use Only:							
Council District	21	This application is a	X Reappointment	New Appointment			
			Attendance Record:				

G	REENVILLE COU	NTY SPECIAL TAX DIS	TRICT APPLICATION
		Devenger Pointe	
	An individual may only an	ply to serve on one board or commiss	sion during any election cycle
		•	
In orde	r for your application to be gi	iven consideration, it is critical that you as completely as possible.	ou answer all of the following questions
Mr N	Mrs X Ms Miss	Barbara McCracken	
lome Address	102 Atherton Way	City Gre	eer
**You must be re	egistered to vote in Greenville	County at the time of application	
Occupation <u>F</u>	Retired		
imployer _			
mployer Addres	s		
olunteer Experience Served for last three	ence ee years on the Devenger Poin	ite STD	
	<u>, </u>		
escribe your un	derstanding of the role of a m	nember of the board or commission to	o which you are applying
_	ate members of the tax district I		, milon you are applying
leet regularly to a	assess needs of the district and	I make recommendations for any tax inc	creases based on these needs.
		contribute as a member of this board	
'ast managerial e	xperience prepares me for wor	king in a collaborative fashion with othe	er members as well as our community.
lave you ever be	en convicted of a crime other	than a minor traffic violation?	Yes X No
so, please give			

Do you <u>currently</u> hold any elected or appointed office o	or commission?	Yes	X No	
, 1965, 119t				
		V Na		
Have you ever been fined for any ethics violations?	Yes	X No		
If so, please comment				
Have you ever been subject to penalty relating to a viol	ation of State ethics	standards?	Yes	χ No
lf so, please explain				
Do you, any member of your immediate family or a bus you or a member of your family is associated, provide gervices to this board for payment?		Yes	X No	
lf so, please explain				
	<u>Statement</u>			
By my signature, I state that all information corbest of my knowledge.	ntained in this appl	lication is true and ac	ccurate to the	
I understand it is my responsibility to insure my and that it has been received by the County Co		bmitted within the ap	plication period	
I understand my appointment to the board for v compensation for my service.	which I am applyin	g will not result in me	e receiving any	
I understand my lack of attendance resulting in within a year may result in my removal from the		e meetings or 25% of	all meetings	
Signature		Date		

Please return completed form by mail, fax or email to:

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

Fax: (864) 467-7358

rmccaskill@greenvillecounty.org

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