



BOARD AND COMMISSION APPLICATION

LINKSIDE SPECIAL TAX DISTRICT

The Linkside Community Special Tax District meets on an as-needed basis.

Personal Information

Name:	david Brown		
Prefix:	Dr.	Birthdate:	
Home Address:		City/State/Zip:	
Email:		Phone #:	
Voter Registration #:			
Employer:	Retired	Occupation:	Retired
Employer Address:		Social Media Profile:	

Experience / Certifications / Interest

Volunteer Experience (please list and describe):

Past Experience: Soccer Coach, VBS at church
Current: Church Finance Committee

Describe your understanding of the position for which you are applying:

Very Little

Describe your strengths or skills that would positively contribute to the LINKSIDE SPECIAL TAX DISTRICT:

I am a retired math teacher. Mathematics I understand.

Other elected or appointed offices / Ethics / Legal

Do you **currently** hold an elected or appointed office or commission?

If yes, please list:

Yes No

Have you ever been fined for an ethics violation?

If yes, please explain:

Yes No

Have you ever been subject to penalty relating to a violation of State ethics standards?

If yes, please explain:

Yes No

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

If yes, please explain:

Yes No

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

If yes, please give details:

Yes No

Additional Questions

Would you be willing to submit to a criminal background check and/or credit check?

Yes No

- Are you aware of the meeting schedule and time commitment for the LINKSIDE SPECIAL TAX DISTRICT? Yes No
- Have you attended a meeting of the LINKSIDE SPECIAL TAX DISTRICT? Yes No
- Are you aware of the County's attendance policy as it relates to boards and commissions? Yes No
- Are you aware this is not a compensated position? Yes No

Statement of Agreement and Understanding

Electronic Signature Agreement. By selecting the "Submit" button, you are signing this Application electronically (e-signature), you agree your "e-signature" is the legal equivalent of your manual signature on this Application. Additionally, you agree to and attest to the following:

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 have read the Greenville County Board and Commission Policy and I understand the rules of conduct for the seat for which I am applying.

I understand that I serve at the pleasure of County Council and all appointments are subject to the Ethics, Government Accountability, and Campaign Reform Act, S.C. Code Ann. Section 8-13-100 et. seq., and any member appointed to a board or commission whose action is inconsistent or may be perceived to be inconsistent with the spirit or intent of the Act may be subject for removal.

I understand that information provided in this application may be subject to South Carolina Freedom of Information disclosure.

Signature: *David Dean Brown*

Date: 3/18/2026

Applicants are encouraged to notify their representing Council Member of their interest to be considered for a desired board seat.