

Staff Use Only:

Council District _____

This application is a

Reappointment

New Appointment

GREENVILLE COUNTY SPECIAL TAX DISTRICT APPLICATION

Buxton Special Tax District

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 Christine Robb

Home Address 300 Winsford Drive City Greenville

Zip 29609 Home Phone 8642358442 Work Phone _____

Voter Registration Number 5 565 75 Email twobassettgreen@aol.com

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

Occupation retired

Employer _____

Employer Address

Volunteer Experience

Furman University Osher LifeLong Inst.office and classroom work and committee leader.

Treasurer for Buxton Special Tax District

Do you currently hold any elected or appointed office or commission No

If yes, list _____

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 _____
to make sure our district is properly managed, bills paid and any repairs or needs of the community are addressed. To be
aware of the happening of County Council. To represent our district.

What specific skills do you believe you could contribute as a member of this board or commission? _____
good communicatin skilled, very organized, math skills, logical thinking and a problem solver

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