Staff Use Only:						
Council District	19	This application is a	X Reappointment	New Appointment		
			Attendance Record:	75% (21 of 28)		

(Name of Board or	edevelopment Authority Commission to which you are applying
·	ve on one board or commission during any election cycle.
	ideration, it is critical that you answer all of the following questions
	completely as possible.
Mr Mrs X Ms Miss Name	Amy Dunn-Coleman
ome Address 105 Chukar Way	City Greenville
*You must be registered to vote in Greenville County	at the time of application
ccupation Stay at Mother/ Family Business Owner	
mployer Coleman Accounting	
mployerAddress 1430 Augusta Street	
Greenville, SC, 29605	
ighest Degree Earned Bachelors	
chool Attended Fuman ield Of Study Psychology	
ield Of Study Psychology olunteer Experience	
	places in the county (School, YMCA, FUSC) for many years.
ery involved in my children's schools since Kindergarten	
oard member for my HOA for the last 5 years	
oard member for my HOA for the last 5 years	of the board or commission to which you are applying
oard member for my HOA for the last 5 years escribe your understanding of the role of a member of	of the board or commission to which you are applying
oard member for my HOA for the last 5 years escribe your understanding of the role of a member of	of the board or commission to which you are applying
oard member for my HOA for the last 5 years escribe your understanding of the role of a member of	of the board or commission to which you are applying
oard member for my HOA for the last 5 years  escribe your understanding of the role of a member of the eapplying for my 3rd term on the GCRA Board	
oard member for my HOA for the last 5 years  escribe your understanding of the role of a member of the eapplying for my 3rd term on the GCRA Board  /hat specific skills do you believe you could contribut	

How many hours/week are you available to give to this board of commissission?		10		
Have you ever attended a meeting of this board or commission?	X	Yes		No
Are you available to meet at the regularly scheduled date and time of the board or commission meeting?	<b>x</b>	Yes		No
Do you, any member of your immediate family, or a business with which you or a family member is associated, provide goods and/or services to this board for payment?		Yes	Х	No
Do you or any member of your immediate family receive direct services from this board?		Yes	X	No
Have you ever been convicted of a crime other than a minor traffic violation? If so, please give details		Yes	Х	No
Do you <u>currently</u> hold any elected or appointed office or commission?	_	No		
If yes, list				
Have you <u>previously</u> held any elected or appointed office or commission?				No
If yes, list				
Have you ever been fined for any ethics violations?  If so, please explain				
Have you ever been subject to penalty relating to a violation of State ethics standards If so, please explain	s?		No	
				_
Are you current in payment of Greenville County property taxes?	X	Yes		No

## If applying for the <u>Accomidations Tax Advisory Committee</u> the <u>Construction Board of Appeals</u> or the <u>Historic Preservation Commission</u> please check the box that applies to your field of employment or expertise:

Accommodations Tax Comm.	Construction Board of Appeals				
Tourism Industry	Architectural				
Cultural / Arts	Fire Protection Eng / Contractor				
Restaurant	Electrical Engineer / Contractor				
Hotel Management	Design/Architectural / Professional Contractor				
	Structural Engineer / Contractor				
Historic Preservation Comm.	Mechanical Engineer / Contractor				
Archeologist	Plumbing Engineer / Contractor				
Historian					
Architect					
Member of Historic Preservation Group					
<u>Statement</u>					
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 a and that it has been received by the County Coun	pplication is submitted within the application period cil Office.				
I understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.					
I understand my lack of attendance resulting in three consecutive meetings or 25% of all meetings within a year may result in my removal from the board.					
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.