		Staff Use Only:									
	Council	District	20	This	application is a	I	X Reappointm	nent	New Appointr	nent	
							Attendance Reco	ord:	n/a		
		GREE		E COUNT				T APP	LICATION		
	Linkside 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.										
x	Mr 🗌	Mrs	Ms	Miss	George Pik						
	me Address	_	Sandstone [City Taulan				
по	me Address						City Taylors				
Oc	cupation	retired									
Em	ployer										
Em	ployer Addre	ess									
 Vol	unteer Expe	rience									
	itrator for Bet		es Bureau								
Des	scribe vour u	Inderstan	ding of the	role of a membe	er of the board	or com	nission to which y	ou are ap	plving		
	-		-				to ta xexpendatur				
Wh	at specific sl	kills do y	ou believe	you could contri	bute as a meml	ber of th	is board or comm	ission?			
			per of severa	al homeowner as	sociations inclue	ding this	one. Funding man	agement e	experience and		
cor	nmunication s	skills.									
	ve you ever k o, please giv		victed of a	crime other than	a minor traffic	violatio	n?	Yes	χΝο		

Do you <u>currently</u> hold any elected or appointed office or commission?	
lf yes, list	
Have you ever been fined for any ethics violations?	
If so, please comment	
Have you ever been subject to penalty relating to a violation of State ethics standards?)
If so, please explain	
Do you, any member of your immediate family or a business with which	
you or a member of your family is associated, provide goods and/or YesX No services to this board for payment?	
If so, please explain	
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.	
l understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.	
l 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.