	For Office Use ONLY	
Council District: 23	This application is a: New Appointment X	Reappointment
		Attendance Record:

## GREENVILLE COUNTY BOARD AND COMMISSION APPLICATION for County-wide Boards

	for County-	wide boards				
Name of Board or Commission to which you are applying: Alcohol and Drug Abuse Commission  An individual may only apply to serve on one board or commission during any election cycle.						
Mr. Mrs. X Ms. Dr. Na	me: Lynne Desmarais Jones					
Home Address: 1 Cortona Circle		City: Greenville	Zip: <u>29609</u>			
Occupation:	CPA - public practice	Employer: self employed - Lynne D	Jones CPA LLC			
Employer Address:	11 North Irvine Street, Suite #4 Greenville, SC 29601					
	Greenvine, 50 27001					
School attended: _	University of North Florida (Jacks	onville FL)				
Highest degree ear	ned: MBA	Field of Study:bachelors in a	ccounting			
Volunteer Experier the advisory boa Giving and active past treasurer of	ice (Please list and describe): I curre and for Pelham Hospital (part of Spa ely serve in leadership on the grant the Children's Museum and a gradu	ently serve as treasurer of the Zoo Fo artanburg Regional Hospital), am in C s committee. Lam a sustainer in the . hate of Leadership Greenville Class #	undation, am on Greenville Women Junior League and 38.			
Members of the A Greenville with re services are acces agreements to furt accordingly to ens	spect to drugs and alcohol, and then sible to meet those needs. The comher its purpose. The Commission	tasked with determining the needs of n to ensure that affordable, accessible mission has the authority to enter int n conducts a continuous study and re nt and relevant. It also governs the Pt	e and high quality to contracts and evises its plan			
As a CPA for 25 serve. I am faminumerous ones.	+ years in public practice, I seek to liar with the requirements of board	is a member of this board or commission provide sound financial guidance to membership and board leadership hat egular basis in a professional capacity assist the Phoenix Center.	all boards on which I			

How many hours per week are you able to commit to this b	oard or commission?3	<del></del>	
Have you ever attended a meeting of this board or commission?			Nox
Are you available to meet at the regularly scheduled date and time of the board or commission meetings?			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?  If yes, please explain:			NoX
Do you or any member of your immediate family receive di	rect services from this board?	Yes 🗌	Nox
Have you ever been convicted of a crime other than a mind If yes, please give details.		Yes□	Nox
Do you <u>currently</u> hold any elected or appointed office or commission?  If yes, please list			NoX
Have you <u>previously</u> held any elected or appointed office or commission?  If yes, please list			No X
Have you ever been fined for an ethics violation?  If yes, please explain:		Yes	Nox
Have you ever been subject to penalty relating to a violatio If yes, please explain:		Yes	No <sup>X</sup>
Are you current in payment of your Greenville County property taxes?		Yes⊠	No□
If applying for the <u>Accommodat</u> the <u>Construction Board of Appeals</u> or t please check the box that applies to y	he Historic Preservation Co	mmission	
Accommodations Tax Comm.  Tourism Industry Cultural / Arts Restaurant Hotel Management  Historic Preservation Comm. Archeologist Historian Architect Member of Historic Preservation Group	Construction Board of Appeals  Architectural  Fire Protection Engineer /Contractor  Design/Architectural /Profession  Structural Engineer /Contractor  Mechanical Engineer /Contractor  Plumbing Engineer /Contractor	al Contractor	

## Statement of Agreement and Understanding

By my signature, I attest 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;

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.

Lynne D. Jones Digitally signed by Lynne D. Jones ON: cn=Lynne D. Jones, o, ou, email=ljones@jlonescpa.com, c=US Date: 2020.06.24 1527:00 -04'00'

Date 6/24/20

## 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 <a href="https://www.greenvillecounty.org">www.greenvillecounty.org</a> website.