| Staff Use Only: | | | | | | | | |
|------------------|--|-----------------------|--------------------|-------------------|--|--|--|--|
| Council District | | This application is a | Reappointment | x New Appointment | | | | |
| | | | Attendance Record: | | | | | |

| GREENVILLE COUNTY SPECIAL TAX DISTRICT APPLICATION | | | | | | | |
|--|---|---------------------------------|--------------------------------|----------|--|--|--|
| | | Ashwicke Tax District | | | | | |
| | An individual may only apply | to serve on one board or comn | nission during any election | ı cycle. | | | |
| In ord | der for your application to be given | | at you answer all of the follo | | | | |
| X Mr | Mrs Ms Miss | Andrew Floyd | | | | | |
| Home Address | 6 Ashwicke Lane | City | Greenville | | | | |
| | | | | | | | |
| | | | | | | | |
| Occupation | Sales | | | | | | |
| Employer | Quantros | | | | | | |
| Employer Addre | ess | | | | | | |
| 55 Beattie Place | <u> </u> | | | | | | |
| Suite 1600 | | | | | | | |
| Volunteer Exper | rience | | | | | | |
| church groups | | | | | | | |
| Habitat for Huma | anity | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | understanding of the role of a mem fairs of Ashwicke Tax district | ber of the board or commissio | n to which you are applying | <u></u> | | | |
| rieip manage an | all's Of ASTIWICKE Tax district | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | kills do you believe you could cont | tribute as a member of this boa | ard or commission? | | | | |
| Business manag | jement | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | peen convicted of a crime other that | an a minor traffic violation? | Yes | X No | | | |
| If so, please giv | e ueidiis | | | | | | |
| | | | | | | | |
| | | | | | | | |

| Do you <u>currently </u> hold any elected or appointed o | office or commission? | Yes | χNο | |
|---|-------------------------------------|-------------------------|------------------|------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Have you ever been fined for any ethics violation If so, please comment | Yes Yes | X No | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Have you ever been subject to penalty relating to | a violation of State ethics | standards? | Yes | X No |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Do you, any member of your immediate family or you or a member of your family is associated, proservices to this board for payment? | | Yes | X No | |
| If so, please explain | | | | |
| | | | | |
| | Ctatamant | | | |
| By my signature, I state that all information best of my knowledge. | Statement on contained in this appl | ication is true and ac | curate to the | |
| I understand it is my responsibility to instand that it has been received by the Coun | | omitted within the app | olication period | |
| I understand my appointment to the board compensation for my service. | d for which I am applying | g will not result in me | receiving any | |
| I understand my lack of attendance result within a year may result in my removal from | | meetings or 25% of a | all meetings | |
| 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.