



CITY OF WINSTON-SALEM  
OFFICE OF THE MAYOR - ALLEN JOINES

CITIZEN APPLICATION FOR ADVISORY  
BOARDS AND COMMISSIONS

Name: DAVID NEILL Race: WHITE  
 Gender:  male  female Birthdate: 7/22/1961 E-mail: dneillmb@aol.com  
 Home Phone: 336-922-0404 Daytime Phone: 336-759-9713 Fax: 336-759-7465  
 Home Address: 3905 CAMERILLE FARM Rd W-S, NC 27106  
 Do you live within the City Limits of Winston-Salem? (circle one)  Yes  No 760-4580  
 Do you live within the County of Forsyth? (circle one)  Yes  No (DneillMB@9mail.com)  
 Current Occupation/Title: Business OWNER/AUTO DEALER  
 Employer/Business Name: Bob Neill Inc  
 Business Address and Zip: 7620 Phoenix Rd Winston-Salem, NC 27106  
 Supervisor Name: \_\_\_\_\_ Telephone: 336-759-9713  
 Education: High School [ ] College  Graduate School [ ] Other [ ]  
 Degree/Subject of Study: Economics  
 School Name/Years Attended: UNC-Chapel Hill 4 years

BOARD/COMMISSION APPLYING FOR (list one): Utilities Commission  
 List the Board or Commission you currently serve and your term expiration date. \_\_\_\_\_

Why are you interested in serving on the Board/Commission you are applying for?  
GENERAL Interest in the Health and vibrancy  
OF OUR COMMUNITY

Are you willing to serve on any other Board/Commission? Please list: Not at this time

Are you interested in serving in any other community volunteer activities? Am currently  
involved with numerous activities

PLEASE SUBMIT ANY RESUME CONTINUED ON NEXT PAGE >

Interest/Skills/Areas of Expertise/Professional Organizations

Finance, Community development

List two personal references below.

Name: Scott WIERMAN <sup>Winston-Salem</sup> Foundation Daytime Telephone: 714

Address: 860 W. Fifth St W-S, NC 27101 Relationship: FRIEND/WAS CHAIR OF HIS Board @ WSF

Name: Richard Budd / Budd Sves Daytime Telephone: 336-765-7690

Address: 2325 S. Stratford Rd W-S, NC, 27114-5128 Relationship: FRIEND - WORKED ON WSF w/ Richard

AFFIRMATION OF ELIGIBILITY

Has any formal charge of professional misconduct, criminal misdemeanor or felony ever been filed against you in any jurisdiction?

Yes  No  If yes, explain complete disposition.

Is there any possible conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee to a Board/Commission?

Yes  No  If yes, explain

I understand this application is public record, and I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize and consent to background checks and to the investigation and verification of all statements contained herein. I further authorize all information concerning my qualifications to be investigated and release all parties from all liability for any damages that may result from this investigation. I understand and agree that any misstatement or conduct will be cause for my removal from any board or commission.

Signature of Applicant: [Signature] Date: 6/22/06

RETURN COMPLETED FORM TO:

Mayor's Office, P.O. Box 2511, Winston-Salem, NC 27102 Telephone: 336-727-2058 Fax: 336-743-3241