City of Winston-Salem
Office of the Mayor - Allen Joines
Citizen Application for Advisory
Boards and Commissions

Name: William Charles Wifeon Race: White
Gender: male female Birthdate: May 11, 1984 E-mail Charles @mag nota partners. com
Home Phone: (336) 575-9351 Daytime Phone: (336) 331-9412 Fax:
Home Address: 1012 West End Barbard, Winster-Schem, NC 27101
Do you live within the City Limits of Winston-Salem? (circle one) (Yes No
Do you live within the County of Forsyth? (circle one) Yes No
Current Occupation/Title: (mmerial Real Estate / Member
Employer/Business Name:  Maznita Patruz UC
Business Address and Zip: 301 N. Man St., Ste. 1300, Winsten-Solem, NC 27101
Supervisor Name:Telephone:
Education: High School [] College [] Graduate School 💢 Other []
Degree/Subject of Study:
School Name/Years Attended:  Validated Variables 2010 - 2013
BOARD/COMMISSION APPLYING FOR (list one):
BID Commitée
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?  — in very tomas Hed to downtown Waston, and think the EID
Committee represents an opportunity to make a tangthe positive Wince in the launten area.
Are you willing to serve on any other Board/Commission? Please list:
Are you interested in serving in any other community volunteer activities?
PLEASE SUBMIT ANY RESUME CONTINUED ON NEXT PAGE > Interest/Skills/Areas of Expertise/Professional Organizations  Duntown Winston-Solan Partnishp: Sourt Member and Char & Planning brum Hee
At Naven Winsten- Salem: Board Member
List two personal references below.
Name: Jason the Daytime Telephone: 354-1500
Address: 305 W. Furth St. Gle 2E Relationship:
Name: Rolph Womble Daytime Telephone:
Address: 540 Trade St. NW Relationship:
AFFIRMATION OF ELIGIBILITY Has any formal charge of professional misconduct, criminal misdemeanor or felony ever been filed against you in any jurisdiction?
Yes X No If yes, explain complete disposition. May 2004 - SWI
Horry County, South Carolina
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:

\_\_\_\_ Date: Way 7 2018

RETURN COMPLETED FORM TO:

Mayor's Office, P.O. Box 2511, Winston-Salem, NC 27102 Telephone: 336-727-2058 Fax: 336-748-3241