

FIFTH MEMBER SERVING ON THE
VANCE COUNTY BOARD OF SOCIAL SERVICES

Name: _____

Address: _____

City, State, Zip: _____

Reappointment: yes _____ no _____

If reappointment, date of original appointment: _____

County Commissioner: yes _____ no _____

Ethnic Background: _____ Gender: _____

Term Expires: 2012

PLEASE RETURN THIS FORM
NO LATER THAN JUNE 1, 2009

TO

Mr. Wayne Adcock, Board Chair
Vance County Department of Social Services
350 Ruin Creek Road
Henderson, N.C. 27536