



COUNTY BOARD OF COMMISSIONER

PINE STREET

D, GA 31750

(229) 426-5100

Steve Taylor - Chairman

Daniel Cowan- District 3

Bennie Calloway- District 2

John W. Mooney- District 3

Hope Harmon- District 2

**APPLICATION FOR APPOINTMENT TO COMMITTEES AND BOARDS**

The information provided on this form is for the use of the Ben Hill County Board of Commissioners in its deliberation to fill vacancies on committees, board and commissions. Applications may be submitted at any time and will be kept on file for a period of one (1) year. Applicants may be asked to attend a designated meeting of the County Board of Commissioners for application review and appointment consideration.

To which committee(s) or board(s) are you seeking appointment?

HOSPITAL AUTHORITY

**Contact Information**

Name: DAPHNE S. WILLIAMS

Address: 138 CREEKSIDE CT

City, State, Zip Code: FITZGERALD, GA 31750

Home Phone: 229 423 7136

Cell Phone: 229 457 5660

Work Phone: 229 426 5147

Email Address: daphneshawwilliams@gmail.com

Date available for appointment Now

County Commission District 2

Are you a registered voter in Ben Hill County?  Yes  No

Please complete the following. You may use additional sheets as needed.

**Community Service**

List boards, commissions, committees or community service organizations that you are currently serving or have served upon, offices held and in what municipality or county.

- CHOICE INK - GED TUTORING PROGRAM
- ADULT ED - VOLUNTEER WIREGRASS GA TECH COLLEGE
- ACT FOR CHANGE - SERVING THE COMMUNITY BY FOOD DRIVES, CHRISTMAS FOR FOSTER CHILDREN, COMMUNITY WIDE BOOK BAG GIVEAWAY, MEALS AND TREATS FOR COMMUNITY ELDERLY, VOLUNTEER TO HELP OTHER ORGANIZATIONS AT THANKSGIVING TO PROVIDE MEALS TO THE COMMUNITY, ETC.

**Employment and Education**

List any employment experience or education that, in your opinion, best qualifies you for this appointment. List job titles, duties (current and past), level of education and certificates or degrees you have obtained.

- BHC TAX ASSESSOR'S OFFICE - APPRAISER I DESIGNATION
- ACCOUNTING DIPLOMA - WIREGRASS GA TECH COLLEGE - CLEAR UNDERSTANDING OF ACCOUNTING TECHNIQUES: PRACTICES
- MICROSOFT OFFICE - EXPERIENCE WITH WORD, EXCEL, ACCESS; OUTLOOK
- DELPHI AUTOMOTIVE - UAW HUMAN RESOURCES REP

Have you ever worked for Ben Hill County?  Yes  No

If yes, please list dates and name(s) of departments.

TAX ASSESSORS OFFICE (CURRENTLY)  
MAGISTRATE OFFICE (INTERN)

Do you or your employer conduct business with Ben Hill County?  Yes  No

If yes, briefly describe the nature of the business.

TAX ASSESSORS OFFICE - REVIEW AND EVALUATE PROPERTY VALUES ACCORDING TO GA DEPT OF REVENUE STANDARDS

**Personal**

Rules of law and ethics prohibit appointees from participating in and voting on matters in which they may have a direct or indirect financial interest. Are you aware of any potential conflicts of interest?

Yes  No

If yes, please indicate potential conflicts.

Are you aware of the time commitment necessary to serve on the committee or board to which you seek appointment and will you have such time?  Yes  No

1. Do you own real property in Ben Hill County?  
Are you current on your property Taxes?

Yes  No  
 Yes  No

2. You may be required to attend training courses outside of Ben Hill County. Reasonable travel expenses would be paid by Ben Hill County pursuant to its travel policies.

Are you willing and able to travel to attend training outside of Ben Hill County

Yes  No

3. Do you have any ownership interest in or have a

Primary shareholder's interest in any business or corporation?

Yes  No

If yes, state the business names(s) and whether they have an office in Ben Hill County

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4. For purposes of this paragraph, the term "immediate family member" means any spouse, child, sibling, parent, grandparent, grandchild, aunt/uncle, or niece/nephew, whether related to you by blood, marriage, or legal adoption.

(a) Do you have an immediate family member who is an elected or appointed official?

Yes  No

If yes, state the family member's name, address, and position held:

\_\_\_\_\_

5. Do you have an immediate family member currently employed with:

Ben Hill County  Yes  No  
City of Fitzgerald  Yes  No  
Fitzgerald Utilities  Yes  No  
Dorminy Medical Center  Yes  No

6. Do you understand that, if appointed, you will have a continuing duty to disclose any conflicts in writing, such as whether you are related to other members on your board, any employees of the board, and any elected officials or public officials, and whether you have any financial interest that could create a conflict?  Yes  No

Please provide information about specific training, education, experience or interests you possess that qualify you as an appointee to the position you seek.

ASSOCIATE DEGREE - CRIMINAL JUSTICE - SOUTH GA COLLEGE DOUGLAS GA  
TECHNICAL DIPLOMA - ACCOUNTING - WIREGRASS GA TECH COLLEGE, FITZ GA  
TECHNICAL DIPLOMA - MICROSOFT OFFICE - WIREGRASS GA TECH COLLEGE FITZ GA  
APPRAISER I - GA DEPT OF REVENUE - ATHENS GA  
ASSESSMENT FUNDAMENTALS, VALUATION OF MOBILE HOMES, CERTIFICATION FOR ASSESSOR  
VALUATION OF PERSONAL PROPERTY, EXEMPT PROPERTIES VALUATION: FUNDAMENTALS

I hereby certify that the preceding information is correct and to the best of my knowledge.

*Donna S. Williams*  
Signature

*2/8/23*  
Date

Mail your complete application to:

Ben Hill County Board of Commissioners  
402 A East Pine Street  
Fitzgerald, GA 31750

Or

Email your completed application to:

[donna.prather@benhillcounty-ga.gov](mailto:donna.prather@benhillcounty-ga.gov)

Thank you very much for giving us the opportunity to consider you for appointment.