

MOTION NO. 9375

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33

A MOTION confirming the Executive's appointment of Allen T. Apodaca to the King County/Metro Consolidation Advisory Committee.

BE IN MOVED by the Council of King County:

The county executive's appointment of Allen T. Apodaca to the King County/Metro Consolidation Advisory Committee, term to expire on December 31, 1995 is hereby confirmed.

PASSED this 20th day of September, 1994.

KING COUNTY COUNCIL
KING COUNTY, WASHINGTON

Passed by a vote of 11-0.

Kent Pullen
Chairman

ATTEST:

Janet Masuo
Deputy Clerk of the Council

APPLICATION INFORMATION FOR
KING COUNTY BOARD AND COMMISSION APPOINTMENTS
(PLEASE ATTACH RESUME IF AVAILABLE)

4-6-94
(Date)
9375

Board/Commission -- for which you are applying: Consolidation Advisory Committee

Name Allen T. Apodaca Phone (206) 932-2133
(Home) (Work)

* Business Address 4154 California Ave S.W. Home Address 19350 49th A. N.E.
Seattle, WA 98116 Seattle, WA 98105

(Please indicate preferred mailing address with an asterisk (*)).

King County Council District

Education Phoenix Union High Sch. Arizona State U. 1960-66 BA-MA
(name of high school, college/university, year graduated, degree)

Professional Licenses Held (if applicable to specific board/commission) NA

Present Employment Coordinator Migrant & Seasonal Farmwork Affairs
(Job Title) (Date of Employment)

Northwest Regional Primary Care Assoc. 3-11-93
(Employer)

Self-employed - Consultant

U.S. Dept of Education - Regional Commissioner
(Previous Employment/Experience)
& Secretary's Regional Representative

Memberships on any city and/or county boards, commissions, or committees and dates of term: Advisory Committee - Health Service Commission

AFFIRMATIVE ACTION PROGRAM AND PERSONAL INFORMATION

The Executive seeks a diverse representation on boards/commissions. Information in this section will assist in achieving this goal and is voluntary on your part.

Asian Hispanic White
 African American Native American Other
Year of Birth _____ Sex (F) (M) Handicap (Y/N) _____

How did you learn of this opportunity? Word of Mouth

Joan Yoshitomi
King County Executive Office
King County Courthouse
516 Third Avenue, Room 400
Seattle, WA 98104-3271

Please return completed form to:



9375

King County Executive
GARY LOCKE
King County Courthouse
516 Third Avenue Room 400
Seattle, Washington 98104-3271
(206) 296-4040
FAX: (206) 296-0194

FINANCIAL DISCLOSURE STATEMENT

TO BE COMPLETED BY ALL KING COUNTY BOARD AND COMMISSION MEMBERS.

IN ACCORDANCE WITH K.C.C. 3.04.050, PLEASE PROVIDE THE INFORMATION REQUESTED EITHER WITHIN TEN (10) DAYS OF APPOINTMENT OR BY APRIL 15TH, WHICHEVER APPLIES, AND RETURN THIS FORM TO SALLY POLIAK, OFFICE OF THE KING COUNTY EXECUTIVE, 400 KING COUNTY COURTHOUSE, 516 THIRD AVENUE, SEATTLE, WA 98104-3271.

FOR REPORTING PURPOSES, "IMMEDIATE FAMILY" INCLUDES SPOUSE, DEPENDENT CHILDREN, AND OTHER DEPENDENT RELATIVES RESIDING IN THE MEMBER'S HOUSEHOLD. "PERSON" DESIGNATES ANY INDIVIDUAL, PARTNERSHIP, ASSOCIATION, CORPORATION, FIRM, INSTITUTION, OR OTHER ENTITY, WHETHER OR NOT OPERATED FOR PROFIT.

PLEASE TYPE OR PRINT ALL INFORMATION

DATE: 3/6/94
NAME: Allen T. Podacz
ADDRESS: 19350 49th Pl. N.E.
BOARD OR COMMISSION: Consolidation Advisory Committee
KING COUNTY DEPARTMENT OR AGENCY AFFILIATION OF BOARD OR COMMISSION:

A. List all sources of income over \$1500.00 (include salary, retirement, and dividend income):

Source of Income	Type of Business	Address
Retirement	Administrator	U.S. Dept of Education
NWRPCA	Association	4154 Calif. Ave S. W.

B. Do you have a direct financial interest in any mutual fund or other "person" or enterprise in excess of \$1500.00 (policies of insurance issued either to yourself or your spouse, accounts in banks, savings and loan associations or credit unions are not considered financial interest; however, municipal bonds, trusts, and all other types of financial interest are included)?

Yes X No _____



If you answered yes, please list:

Mutual Fund/Enterprise	Type of Business	Address
Mass Mutual	Annuity	Two Union Square Seattle WA.

C. List any office, directorship, or trusteeship in any "person" or other governmental entity which does business in King County and which is held by you or members of your immediate family:

Name/Relationship	Type of Business	Position Held
Ted Apodaca (son)	Contractor	President

D. List, by legal description or popular address, all real property owned by you or a member of your immediate family in King County. Include options to buy if the property is valued in excess of \$1500.00:

Address	Name of Owner	Relationship to Employee
19350 49 Pl. N.E.	Apodaca G.T.	owner

E. List all real property located in King County and divested by you or a member of your immediate family during the reporting year and valued in excess of \$1500.00:

Address	Name of Owner	Amount Divested
N/A		

F. This section is to be completed by attorneys who practiced before state and local regulatory agencies within the preceding twelve months:

1. List the name of the "person" of which you are a member, partner, or employee:

N/A

2. List the name(s) of agencies that you practice before:

N/A

3. List the amount of gross compensation in excess of \$1500.00 received by the "person" and attorney respectively as a result of your practice before such agencies in the last twelve (12) months:

N/A

ATTESTATION:

I, Allan T. Updeave, CERTIFY UNDER PENALTY OF PERJURY THAT THIS STATEMENT IS TRUE, ACCURATE, AND COMPLETE.

Allan T. Updeave
Signature

SIGNED THIS 6 DAY OF April, 1994.

Please attach additional sheets if necessary.