May 26, 1995

Introduced By:

LOUISE MILLER

ew

1

2 3

4

5

6

7

8

9

10

11

12 13

14

15 16 17

18

19

Proposed No.:

95 - 397

MOTION NO. **9661**

A MOTION confirming the Executive's appointment of Al Drinkwine to the King County Community Mental Health Advisory Board.

BE IT MOVED by the Council of King County:

The county executive's appointment of Al Drinkwine to the King County Community

Mental Health Advisory Board, term to expire on June 30, 1997, is hereby confirmed.

PASSED by a vote of 10 to Othis 25 tay of September, 1995

KING COUNTY COUNCIL KING COUNTY, WASHINGTON

Kent Puller Chair

ATTEST:

Attachments: Application

Financial Disclosure Statement

20

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

5/23/95 (Date)

MAY 25 1995

	Board/Commission for which you are applying: Kikh Co. MENTAL
3	COUNTY EXECUTIVE BUARD
	Name <u>AL DRINGWINE</u> Phone 821-1737 281-609 (Home) (Work)
	Business Address INGRAHAM HIGH SCHOME Address 14004-119 AUS N
	SEATTLE WA. KIRKANUAWA. 9803
	(Please indicate preferred mailing address with an asterisk (*).
	King County Council District
	Education 1961 -CATUEDRALHI, SUPERIOR WISC.
	(name of high school, college/university, year graduated, degree)
,	BELLEUYE COMCOL, -AA -1970
	CBUTRAL WA STXTE UNIO, BA-1972
Ī	Professional Licenses Held (if applicable to specific board/commission)
	Present Employment Special Ed. 1857, Soot, Jan 85-Passer (Job Title) (Date of Employment) SEATTLE SCHOOL 8137. (Employer)
,	(cmproyer)
•	
_	45. DEPT. OF NAUY - SPECIES SERVICE
(Previous Employment/Experience)
1	(Previous Employment/Experience) OIRECTOR
- N	<u> </u>
- N t	Memberships on any city and/or county operands, commissions, or committees and lates of term: AFFIRMATIVE ACTION PROGRAM The Executive seeks a diverse representation on board
- Nt c - A A	demberships on any city and/or county poards, commissions, or committees and lates of term: AFFIRMATIVE ACTION PROGRAM The Executive seeks a diverse representation on board and PERSONAL INFORMATION commissions. Information in this section will assist

Please return completed form to:

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



King County Board of Ethics

King County Administration Building 500 Fourth Avenue Room 553 Seattle, Washington 98104

206-296-1586

KING COUNTY FINANCIAL DISCLOSURE STATEMENT

All Board and Commission Members

In accordance with Section 3.04.050 of the King County Code, all King County board and commission members are required to complete a financial disclosure statement within ten (10) days of appointment and by April 15 of each year.

For reporting purposes, "immediate family" includes spouse, dependent children, and other dependent relatives residing in the employee's household. "Person" designates any individual, partnership, association, corporation, firm, institution, or other entity, whether or not operated for profit.

Type or print all information and sign this form on page three.

Use additional sheets if necessary.

Return to the Director, Community Relations King County Executive Office 400 King County Courthouse 516 Third Avenue Seattle, WA 98104

NAME:	AL DRI	NA WINE		
-				
ADDRESS: _	14004-)	14 NE -	KIRMINED	W1,98

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

Source of Income	Type of Business	Address	
SEATTLE SEX DE	EDUCATION .	510-424 AUEV, 55ATT	Æ
			



OOT		
excess of \$1500.00 (insurance	issued either to yourself ons are not considered fina	tual fund or other "person" or enterprise in r your spouse, accounts in banks, savings and ncial interest; however, municipal bonds, are included)?
	□ YES	M NO
If you answered yes, please list	t: 	
Mutual Fund or Enterprise	Type of Business	Address
	:	·
		"person" or other governmental entity I by you or members of your immediate
Name/Relationship	Type of Business	Position Held
immediate family in King Cour \$1500.00. Address		al property owned by you or a member of your y if the property is valued in excess of Relationship to Employee
14004 -119 AUENE FIRKAANO	SAME	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	·	
E. List all real property loc family during the reporting year		sold by you or a member of your immediate \$1500.00:
Address	Name of Owner	Amount Sold For
	· · · · · · · · · · · · · · · · · · ·	
		•
	·	,

1.	List the name of the "person of which you are a member, partner, or employee:
•••	mot the final of the person of which you are a memory, paramet, or employee.
•	
2.	List the name(s) of the agencies that you practice before:
3.	List the amount of gross compensation in excess of \$1500.00 received by the "r
	and attorney respectively as a result of your practice before such agencies in the
	twelve months:
	twelve months:
	twelve months:
	ATTESTATION (Required of all board and commission members)
,	ATTESTATION
,	ATTESTATION (Required of all board and commission members) A L Dever vere , certify under penalty of perjury that this ment is true, accurate, and complete.
	ATTESTATION (Required of all board and commission members) A C DRIVER (KEE), certify under penalty of perjury that this

Statement of Confidentiality: Pursuant to K.C.C. 3.04.110, the statements of elected officials, candidates, department directors, division managers, the deputy county executive(s), and the county executive's administrative assistants shall be public record. All other statements, including those of board and commission members, shall not be made public without the written approval of the Board of Ethics. The Board of Ethics has adopted administrative procedures to ensure that the statements of all other County employees and board and commission members will not be released without prior notification of such employees and members, and without opportunity to assert a right to privacy by filing motion in Superior Court.

King County Board of Ethics 2/9