

January 18, 1996

Introduced By:

Derdowski

kk

Proposed No.:

96-051

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MOTION NO. **9765**

A MOTION confirming the Executive's appointment of Elaine Wagner, who resides in Council District Twelve, to the King County Department of Transportation Accessible Services Advisory Committee.

BE IT MOVED by the Council of King County:

The county executive's appointment of Elaine Wagner, who resides in Council District Twelve, to the King County Department of Transportation Accessible Services Advisory Committee, for a partial term to expire on March 15, 1997, is hereby confirmed.

PASSED by a vote of 10 to 0 this 29th day of January, 1996

KING COUNTY COUNCIL
KING COUNTY, WASHINGTON

Jane Hague
Chair

ATTEST:

Gerald A. Petrus
Clerk of the Council

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

15 Nov 95
(Date)

9765

Board/Commission -- for which you are applying: King County

Accessible Services Advisory Group

Name ELAINE G WAGNER Phone 206/322-5449
(Home) (Work)

Business Address _____ Home Address 4410 334th SE
* POB 1166 Fall City WA
Fall City WA 98024

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

King County Council District _____ Rochester Rd. Rochester, MN

Education MINNETONKA Sr H.
(name of high school, college/university, year graduated, degree)

Columbus St Lab, Columbus, Ohio certified
ADA

Current: City Univ, Bellevue, WA

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

Present Employment NONE
(Job Title) (Date of Employment)

N/A
(Employer)

EDNA ASSOC
(Previous Employment/Experience) PERSONEL MGR & Secty
ENDED 6-30-95

Memberships on any city and/or county boards, commissions, or committees and dates of term: NONE

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 1956 Sex F (F) _____ (M) Handicap (Y/N) Y (Blind)

How did you learn of this opportunity? thru Metro

Please return completed form to:
Joan Yoshitomi
King County Executive Office
King County Courthouse
516 Third Avenue, Room 400
Seattle, WA 98104-3271



9765

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**

DATE: 15 Nov 95

NAME: ELAINE G WAGNER

ADDRESS: POB 1166
Fall City WA 98024

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
<u>NONE</u>		



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

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

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

- 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 past twelve months:

ATTESTATION
 (Required of all board and commission members)

I, ELAINE G WAGNER certify under penalty of perjury that this statement is true, accurate, and complete.

Elaine G Wagner
 Signature

Signed this 15 day of Nov, 1995.

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.