June 21, 1996

Introduced By:

KENT PULLEN

kk

Proposed No.:

96-564

MOTION NO. **99**(

A MOTION confirming the Executive's appointment of James McGhee, who resides in Council District Nine, to position number nine on the King County Civil Rights Commission.

BE IT MOVED by the Council of King County:

The county executive's appointment of James McGhee, who resides in Council District Nine, to position number nine on the King County Civil Rights Commission, term to expire on June 1, 1997, is hereby confirmed.

PASSED by a vote of 13 to 0 this 22 nd day of fu

, 19**96** 

KING COUNTY COUNCIL KING COUNTY, WASHINGTON

Chair Chair

ATTEST:

Clerk of the Council

Attachments: Application

Financial Disclosure Statement

**Board Profile** 

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

9909

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	Board/Commission for whic	h you are appl	ying: <u>Kindi</u>	County	ivit Rights C	CHASTE
Business Address P.O. Box 18106 Home Address 24204 138W & SEXHUT WA 98118 KENT WA 98042 **  Mally 24204 138W SE KENT WA 98042 **  (PleaseOindicate preferred mailing address with an asterisk (*).  (king County Council District 9.  Education College Way of Paget Sound BA 1974 (name of high school, college/university, year graduated, degree)  Professional Licenses Held (if applicable to specific board/commission)  Present Employment PRESIDENT JAN 1939  (Job Title) (Date of Employment)  Amarian Automotive Dist Two  [Employer)  Previous Employment/Experience)  Interpretative Action Program The Executive seeks a diverse representation on boards/commissions, or commissions. Information in this section will assist in achieving this goal and is voluntary on your part.  Asian Hispanic White Other Handicap (Y/N)	Name JAMES L. MCG	hee	Phone 206	. <u>630-363</u> 7	939-91 (Work)	08
Professional Licenses Held (If applicable to specific board/commission)  Professional Licenses Held (If applicable to specific board/commission)  Present Employment    Color   Color	Business Address P.O. Bo	X 18106	Home Addr	ess 24204	13845 E	
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	How did you learn of this op	portunity?				

Please return completed form to:

Karen Keegan King County Executive Office King County Courthouse 515 Third Avenue, Room 400 Seattle, WA 98104-3271

# KING COUNTY CIVIL I June 10

Posit	Position # Name	Sex	Ethnicity	KC District/
#1	Willendorf, Debra	[ <u>*</u>	Caucasian	1/Fimia
#2	Booth, David	Σ	Caucasian	2/Sullivan
#3	Roybal, Jr., Lawrence	$\mathbf{Z}$	Hispanic	3/Miller
#4	Dubay, Bill	Σ	Caucasian	4/Phillips
#2	Grant, Juanita	<u>-</u>	African- American	5/Sims
9#	Blaricom, Van	Σ	Caucasian	6/McKenna
8#	Palao-Vargas, Cecilia	[I	Hispanic	8/Nickles
6#	McGhee, James	Σ	African- American	9/Pullen
#10	Cavazos, Sylvia	[24	Hispanic	10/Gossett
#11	Kawabori, Justin	Σ	Asian	11/Hague



#### 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 King County Board of Ethics Rm. 553, County Administration Bldg. 500 Fourth Avenue Seattle, WA 98104

	DATE: JUNE 18 96
NAME: James L. McGhe	<u> </u>
ADDRESS: 24204 1384 1	WE S.E KENT WA 980

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

Source of Income	Type of Bu	siness		j.	Address		
AAD to c	Aitomotive	wonder	WK F	D.BOX	18106	554	98118
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excess of \$1500.00 (insurance i	ssued 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	₩ ио
If you answered yes, please list:		
Mutual Fund or Enterprise	Type of Business	Address
		"person" or other governmental entity d by you or members of your immediate
Name/Relationship	Type of Business	Position Held
HOME		
		al property owned by you or a member of your y if the property is valued in excess of
Address	Name of Owner	Relationship to Employee
None		
family during the reporting year	and valued in excess of	
Address	Name of Owner	Amount Sold For
NOUE		
** ** ** ** ** ** ** ** ** ** ** ** **	2	· ·

1.	List the name of the "person of which you are a member, partner, or employee:
2.	List the name(s) of the agencies that you practice before:
	<del>-</del>
	and attorney respectively as a result of your practice before such agencies in the twelve months:
	twelve months:
	ATTESTATION
	twelve months:

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