

City of Seattle

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CITY OF SEATTLE



2015 MAR 20 PM 4:07

Ed Murray, Mayor

CITY CLERK

Public Development Authority Statement of Economic Interest – Calendar Year 2015

Date: 2-11-15

Name: MARIA BATAYOLA

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input checked="" type="checkbox"/> Board member
	<input type="checkbox"/> Administrative and/or management staff
	<input type="checkbox"/> Other (please list)

DIRECTIONS:

Fill out this form in its entirety. Navigate through the form by either using the tab button or your mouse. You will only be able to fill out the required fields, which are highlighted in gray. If a question is not applicable to your situation, double click on the check box after the term "Not Applicable."

DEFINITIONS:

*** Immediate Family:**

(1) a spouse; (2) any dependent parent, parent-in-law, child or son-in-law or daughter-in-law; or (3) any person, parent-in-law, child or son-in-law or daughter-in-law; sibling, uncle, aunt, cousin, niece or nephew residing in the household of the corporate official or employee.

*** Person:**

means individual, association, corporation, or other legal entity.

*** Adjacent:**

means property in the same block or in a block adjoining (immediately across the street from) an area in which the corporation with which he/she is associated functions or a block in which the corporation owns, leases, manages or otherwise controls property. Decentralized holdings should be reviewed on a case by case basis.

***Executive, professional, or administrative:**

includes the Directors of each authority; personnel with a confidential or fiduciary relationship with the authority; personnel engaged in policy level activities; personnel with management responsibilities in the administration of authority programs, projects or activities.

QUESTIONS:

Seattle Municipal Code (SMC) 3.110.570 is the governing authority for the following questions.

SMC 3.110.570(a): All compensated corporate employees holding executive, professional or administrative positions designated by each corporation in its respective rules and regulations and all uncompensated officials and employees shall, within two weeks of being appointed or hired, and thereafter annually by April 15th, file with each corporation a written statement sworn as to its truth and accuracy stating for himself or herself and all members of his or her immediate family for the proceeding calendar year:

(1) (List) – The names and addresses of each person or entity doing business with the corporation from which the official or employee or a member of his or her immediate family has received compensation in any form of a total value of \$2,500 or more, excluding campaign contributions reported in accordance with applicable law: **(Use additional sheets if necessary)**

NOT APPLICABLE:

Name	Address (City, State, Zip)

(2) (List) – The names and addresses of each entity doing business with the corporation in which the officer or employee or a member of his or her immediate family has a direct financial interest with a value of \$1,500 or more; provided that the policies of insurance and amounts on deposit in accounts with banks, savings and loan associations or credit unions shall not constitute a direct financial interest within the meaning of this section: **(Use additional sheets if necessary)**

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(3) (List) – The names and addresses of each entity doing business with the corporation in which the officer or employee or a member of his/her immediate family holds a position as officer, director or trustee, and the title of each position held: (Use additional sheets if necessary)

NOT APPLICABLE:

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NOT APPLICABLE:

Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Maria Batayola (Name) 2-11-15 (Date)

Contact Telephone: (206) 293 2951

Email: mjumpstart@msn.com (Work)

Email: _____ (Home) Optional

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Ed Murray, Mayor

CITY CLERK

Public Development Authority
Statement of Economic Interest – Calendar Year 2015

Date: 2/11/15
Name: DAVID C CHANG

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

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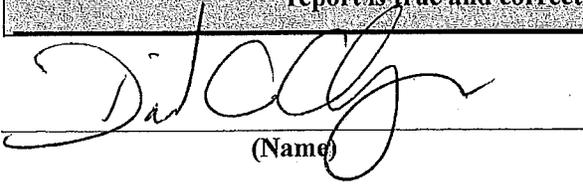
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Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

 (Name) 2/11/15 (Date)

Contact Telephone: 609, 206 2052

Email: dcmd@hotmail.com (Work)

Email: _____ (Home) Optional

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Ed Murray, Mayor

CITY CLERK

Public Development Authority Statement of Economic Interest – Calendar Year 2015

Date: February 11, 2015
Name: Casey Huang

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input checked="" type="checkbox"/> Board member
	<input type="checkbox"/> Administrative and/or management staff
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Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Casey Huang

2/11/2015

(Name)

(Date)

Contact Telephone: (206) 971-5593

Email: caseyh@mithun.com (Work)

Email: _____ (Home) Optional

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Ed Murray, Mayor

CITY CLERK

Public Development Authority Statement of Economic Interest – Calendar Year 2015

Date: 2-11-15

Name: Michael Ltti

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
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Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Michael Atti (Name) 2/11/15 (Date)

Contact Telephone: (360) 725-5667

Email: michaeli@capaa.wa.gov (Work)

Email: _____ (Home) Optional

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Ed Murray, Mayor

CITY CLERK

Public Development Authority
Statement of Economic Interest – Calendar Year 2015

Date: February 11, 2015

Name: Sared Jonson

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input checked="" type="checkbox"/> Board member
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Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Jared Jonson (Name) 2/11/2015 (Date)

Contact Telephone: (206) 434-1314

Email: jared.jonson@ali.org (Work)

Email: _____ (Home) Optional

This Report is Not Acceptable Without the Filers Signature

City of Seattle

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Ed Murray, Mayor

CITY CLERK

Public Development Authority
Statement of Economic Interest – Calendar Year 2015

Date: February 9, 2015

Name: Wayne H Lau

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
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Ed Murray, Mayor

CITY CLERK

Public Development Authority Statement of Economic Interest – Calendar Year 2015

Date:

02/11/15

Name:

PAUL MAR

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
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Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

PAUL MAR Paul Mar 02/11/15
 (Name) (Date)

Contact Telephone: (206) 838 8233

Email: paulm@scidpa.org (Work)

Email: _____ (Home) Optional

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Ed Murray, Mayor

CITY CLERK

Public Development Authority
Statement of Economic Interest – Calendar Year 2015

Date: 2/11/2015

Name: Phillip S. B.

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
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*** Immediate Family:** (1) a spouse; (2) any dependent parent, parent-in-law, child or son-in-law or daughter-in-law; or (3) any person, parent-in-law, child or son-in-law or daughter-in-law; sibling, uncle, aunt, cousin, niece or nephew residing in the household of the corporate official or employee.

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***Executive, professional, or administrative:**

includes the Directors of each authority; personnel with a confidential or fiduciary relationship with the authority; personnel engaged in policy level activities; personnel with management responsibilities in the administration of authority programs, projects or activities.

QUESTIONS:

Seattle Municipal Code (SMC) 3.110.570 is the governing authority for the following questions.

SMC 3.110.570(a): All compensated corporate employees holding executive, professional or administrative positions designated by each corporation in its respective rules and regulations and all uncompensated officials and employees shall, within two weeks of being appointed or hired, and thereafter annually by April 15th, file with each corporation a written statement sworn as to its truth and accuracy stating for himself or herself and all members of his or her immediate family for the proceeding calendar year:

(1) (List) – The names and addresses of each person or entity doing business with the corporation from which the official or employee or a member of his or her immediate family has received compensation in any form of a total value of \$2,500 or more, excluding campaign contributions reported in accordance with applicable law: **(Use additional sheets if necessary)**

NOT APPLICABLE:

Name	Address (City, State, Zip)

(2) (List) – The names and addresses of each entity doing business with the corporation in which the officer or employee or a member of his or her immediate family has a direct financial interest with a value of \$1,500 or more: provided that the policies of insurance and amounts on deposit in accounts with banks, savings and loan associations or credit unions shall not constitute a direct financial interest within the meaning of this section: **(Use additional sheets if necessary)**

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NOT APPLICABLE:

Name	Title

(4) (List) – List, including legal or other sufficient description as prescribed by the corporation, of all real property in areas in which the corporation with which he/she is associated functions or adjacent to such areas or properties owned, leased, managed or otherwise controlled by such corporation in which the officer, employee, or member of his/her immediate family holds a direct financial interest or any option to purchase: (Use additional sheets if necessary)

NOT APPLICABLE:

Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Phillip Sit (Name) 2/11/2015 (Date)

Contact Telephone: (206) 355 2068

Email: phillip.sit@kingcounty.gov (Work)

Email: _____ (Home) Optional

This Report is Not Acceptable Without the Filers Signature

City of Seattle

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CITY OF SEATTLE

2015 MAR 20 PM 4:08



Ed Murray, Mayor

CITY CLERK

Public Development Authority Statement of Economic Interest – Calendar Year 2015

Date: 3/2/2015

Name: Marka Winkler chi

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input type="checkbox"/> Board member
	<input checked="" type="checkbox"/> Administrative and/or management staff
	<input type="checkbox"/> Other (please list)

DIRECTIONS:

Fill out this form in its entirety. Navigate through the form by either using the tab button or your mouse. You will only be able to fill out the required fields, which are highlighted in gray. If a question is not applicable to your situation, double click on the check box after the term "Not Applicable."

DEFINITIONS:

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QUESTIONS:

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NOT APPLICABLE:

Name	Address (City, State, Zip)

City of Seattle

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CITY OF SEATTLE

2015 MAR 20 PM 4:08



Ed Murray, Mayor

CITY CLERK

Public Development Authority Statement of Economic Interest – Calendar Year 2015

Date: 2/12/15

Name: Veronica Wood

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input type="checkbox"/> Board member
	<input checked="" type="checkbox"/> Administrative and/or management staff
	<input type="checkbox"/> Other (please list)

DIRECTIONS:

Fill out this form in its entirety. Navigate through the form by either using the tab button or your mouse. You will only be able to fill out the required fields, which are highlighted in gray. If a question is not applicable to your situation, double click on the check box after the term "Not Applicable."

DEFINITIONS:

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QUESTIONS:

Seattle Municipal Code (SMC) 3.110.570 is the governing authority for the following questions.

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Name	Address (City, State, Zip)

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Name	Address (City, State, Zip)

(3) (List) – The names and addresses of each entity doing business with the corporation in which the officer or employee or a member of his/her immediate family holds a position as officer, director or trustee, and the title of each position held: (Use additional sheets if necessary)

NOT APPLICABLE:

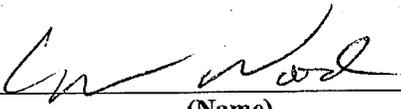
Name	Title

(4) (List) – List, including legal or other sufficient description as prescribed by the corporation, of all real property in areas in which the corporation with which he/she is associated functions or adjacent to such areas or properties owned, leased, managed or otherwise controlled by such corporation in which the officer, employee, or member of his/her immediate family holds a direct financial interest or any option to purchase: (Use additional sheets if necessary)

NOT APPLICABLE:

Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.


2/12/15

 (Name) (Date)

Contact Telephone: (206) 838-8231

Email: vernwe@secdpa.org (Work)

Email: _____ (Home) Optional

This Report is Not Acceptable Without the Filers Signature



2015 MAR 20 PM 4:08

Ed Murray, Mayor

Public Development Authority CITY CLERK
Statement of Economic Interest – Calendar Year 2015

Date: 2/11/15

Name: Scott Yasui

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input checked="" type="checkbox"/> Board member
	<input type="checkbox"/> Administrative and/or management staff
	<input type="checkbox"/> Other (please list)

DIRECTIONS:

Fill out this form in its entirety. Navigate through the form by either using the tab button or your mouse. You will only be able to fill out the required fields, which are highlighted in gray. If a question is not applicable to your situation, double click on the check box after the term "Not Applicable."

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Name	Address (City, State, Zip)

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NOT APPLICABLE:

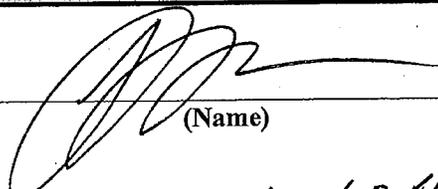
Name	Title

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CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.


2/11/15

 (Name) (Date)

Contact Telephone: (206) 624-3600

Email: syasui@riddellwilliams.com (Work)

Email: _____ (Home) Optional

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2015 MAR 20 PM 4:08

City of Seattle



CITY CLERK

Ed Murray, Mayor

Public Development Authority
Statement of Economic Interest – Calendar Year 2014

Date: 3/4/2015

Name: Nelson Yong

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input checked="" type="checkbox"/> Board member
	<input type="checkbox"/> Administrative and/or management staff
	<input type="checkbox"/> Other (please list)

DIRECTIONS:

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Name	Address (City, State, Zip)

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NOT APPLICABLE:

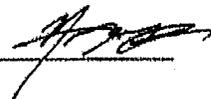
Name	Title

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NOT APPLICABLE:

Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Nelson Yong  3/4/2015
 (Name) (Date)

Contact Telephone: (206) 832.7320

Email: nelson @ reignlabs.com (Work)

Email: _____ (Home) Optional

This Report is Not Acceptable Without the Filers Signature

City of Seattle

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Ed Murray, Mayor

2015 MAR 20 PM 4:08

Public Development Authority
Statement of Economic Interest – Calendar Year 2015

CITY CLERK

Date: February 11, 2015

Name: Karen Yoshitomi

Public Development Authority (Check only one box):	<input type="checkbox"/> Burke-Gilman Place	<input type="checkbox"/> Capitol Hill Housing
	<input checked="" type="checkbox"/> Chinatown-International District	<input type="checkbox"/> Historic Seattle
	<input type="checkbox"/> Museum Development Authority	<input type="checkbox"/> Pacific Hospital
	<input type="checkbox"/> Pike Place Market	<input type="checkbox"/> Seattle Indian Services Commission

Filing Status (Check only one box):	<input checked="" type="checkbox"/> Board member
	<input type="checkbox"/> Administrative and/or management staff
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Name	Title

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NOT APPLICABLE:

Name	Address (City, State, Zip)

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Karen J. Gordon
(Name)

February 11, 2015
(Date)

Contact Telephone: (206) 412-3210

Email: KarenJ@jccan.org (Work)

Email: Kzmj@msn.com (Home) Optional

This Report is Not Acceptable Without the Filers Signature