Washington State Public Disclosure Commission

Personal Financial Affairs Statement
Reporting Modification Application and Certification

Application Instructions

Request for exemption from reporting **Washington real estate**
pursuant to RCW 42.17A.120 and WAC 390-28-100

State law allows filers of the F-1 Personal Financial Affairs Statement to seek a modification or suspension of reporting some information. RCW 42.17A.120 states in part:

> *The commission may suspend or modify any of the reporting requirements of this chapter if it finds that literal application of this chapter works a* ***manifestly unreasonable hardship*** *in a particular case and the suspension or modification* ***will not frustrate the purposes of this chapter****. The commission may suspend or modify reporting requirements only after a hearing is held and the suspension or modification receives approval. The commission shall act to suspend or modify any reporting requirements only to the extent necessary to substantially relieve the hardship. (Emphasis added)*

To request a modification:

(1) Complete your Personal Financial Affairs Statement (F- 1) (answer "yes" when asked if you are planning on requesting a residential address exemption from the Commission);
(2) Answer all applicable questions on this application. All applicants **must** complete questions #1 and #4;
(3) Include an email address for the PDC to use for correspondence regarding your request;
(4) Sign the certification, and
(5) Return this application, the signed certification (if waiving personal appearance at the public hearing) and your completed F-1 to the PDC.

Applications are due March 10th for annual filers, or prior to the two-week deadline for candidates and new appointees.

Questions? Contact PDC staff at (360) 753-1111; 1-877-601-2828 (toll-free in Washington State) or by e-mail at pdc@pdc.wa.gov.

Please note: A filer who held the office of judge, sheriff, or prosecutor, or whose spouse, registered domestic partner, or adult dependent held one of those offices during the reporting period of an F-1 is statutorily eligible to not reveal their personal residential address and does need a modification.

Application Questionnaire

Applicant Information

Filer Name (as it appears on the F-1): _____

Office Held or Sought: _____

Period Covered by Request (calendar year or previous 12 months): _____

Filing Status (check one):
☐ An elected or state appointed official filing annual F-1
☐ Candidate filing F-1
☐ Newly appointed filing F-1

Is this a renewal of a previously granted request?
☐ Yes ☐ No

Instructions

Please answer each question below. You may attach court documents or other relevant items for consideration. **Please note that this application and any documents submitted for consideration are public documents subject to the Public Records Act RCW 42.56.**

1. **EMAIL ADDRESS.** Pursuant to RCW 42.17A.055, email is the official means of communication for the PDC. Please supply an email address to use for correspondence with you about your request.
   Email address: _____

2. **IDENTIFICATION OF REAL ESTATE.** Are you requesting to be exempted from disclosing Washington real estate on the F-1? Per WAC 390-28-090, the Commission may grant your modification request if it finds that identifying real estate on your F-1 would cause a manifestly unreasonable hardship and that granting the limited modification would not frustrate the purposes of the act. **If the disclosure of real estate on the F-1 could cause you or your family harm, based upon evidence of a specific threat, a no-contact order or similar personal safety concern, please explain the hardship in detail. *Attach a sheet if more room is needed.***

_____

3. **NOT FRUSTRATE THE PURPOSES OF THE ACT. Please describe the jurisdiction or agency for which you hold or seek public office, and the duties performed by you as a public official (examples: adopting rules or ordinances, hiring staff, approving) contracts, setting policy, presiding over cases, etc.). Also explain why your real estate holdings present no actual or potential conflict of interest. *Attach a sheet if more room is needed.***

4. **CONFLICT RECUSAL**. If any matter coming before you at the public entity you serve involves a conflict of interest between your personal interests and your public duties, will you recuse yourself from that matter, regardless of whether you have disclosed that personal interest on an F-1 form?

☐ Yes ☐ No

If you answered no, please explain why not. ***Attach a sheet if more room is needed.***

5. **OTHER INFORMATION.** Is there any other information you want the Commission to consider regarding your modification request? (If you are attaching any information or documents, please describe attachments.) ***Attach a sheet if more room is needed.***

Hearing Process

Your request, including the F-1, this Application Questionnaire and any other documents provided, will be presented at a public hearing.

You are not required to participate at the hearing. If you will not be attending the hearing in person or by telephone, you must complete and sign the attached certification prior to submission.

The Commission can grant your request in full, grant part of your request, deny your request, or ask for additional information to be heard at a future public hearing.

An order will be issued to you by e-mail with the Commission's decision.

Certification for an Application for a Reporting Modification or Suspension When Applicant Is Waiving Personal Appearance At the Hearing

(Notary Not Required)

I am wa1vmg my personal appearance at the hearing regarding my request for a reporting modification or suspension, and request that the Commission consider the information provided in my written application. I certify under penalty of perjury under the laws of the State of Washington that the facts set forth in the attached application for a reporting modification are true and accurate to the best of my actual knowledge or belief.

List the date of the application request: _____

Entity or name of individual
requesting reporting modification: _____

By printing your full name below, you CERTIFY that the information in this waiver is true and correct.

Applicant's full printed name: _ _ _ _ _ _ _ _

Business street address: _____

City, state and zip code: ___ _

Telephone number: (__ __ - __

E-Mail Address: _____

Date Signed: _____

Place Signed (City and County: _____ City _____ County

*RCW 9A.72.040 provides that: "(1) A person is guilty of false swearing if he makes a false statement, which he knows to be false, under an oath required or authorized by law. (2) False swearing is a gross misdemeanor."

PLEASE SEND THIS SIGNED CERTIFICATION VIA E-MAIL TO THE PDC WITH YOUR MODIFICATION REQUEST.