

King County Boards and Commissions King County Executive Office 401 Fifth Ave, Suite 800 Seattle, WA 98104 206-263-9651 Rick.Ybarra@kingcounty.gov

## **Statement of Financial and Other Interests**

King County Board, Commissions, Committees, and Other Multimember Bodies Filing Year 2021

Read all instructions incomplete form		ully then fully complete each section. be filed.					
Name:	Ashley Byrd						
Board or Con	nmission:	: King County Employee Giving Program Committee					
$\circ$		iling within two weeks of initial nomination or appointment, reporting on the preceding 12 dar months.					
		Nomination or appointment date:					
$\odot$		iling an annual statement, reporting on calendar year 2020 (See Item No. 3, "Period of ting" in Filing Instructions.)					
		Financial and Other Interests to Report  Note: Underlined terms are defined in the Filing Instructions and in the Code of Ethics					
During the rep value from any responsibility?	oorting peri y <u>person</u> e Y ach <u>persor</u>	Its and Things of Value riod, did you, or a member of your immediate family receive compensation, gifts, or things of the engaged in any transaction with King County in which you participated or for which you had the engaged in any transaction with King County additional questions:  In engaged in any transaction with King County from whom the compensation, gift, or thing the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with King County from whom the compensation is the engaged in any transaction with the engaged in any transacti					
2) Name of in	dividual w	who received the compensation, gift, or thing of value and their relationship to you.					
Describe the s Ethics Program		nd provide any additional information regarding the <u>compensation, gift</u> or <u>thing of value</u> for the deration below	the				
	orting per y transact	riod, did you, or a member of your <u>immediate family</u> possess a financial interest in any <u>persetion with King County</u> in which you <u>participated</u> or for which you had responsibility?  Yes <b>If yes, please answer the following additional questions:</b>	<u>on</u>				

1) Name of each person engaged in any transaction with King County in whom a financial interest was possessed.						
2) Name of individual who received the <u>compensation</u> , <u>gift</u> , or <u>thing of value</u> and their relationship to you.						
Describe the situation and provide any additional information regarding the financial interest for the Ethics Program's consideration below.						
C. Positions  During the reporting period, did you, or a member of your <u>immediate family</u> hold a position in any <u>person</u> * engaged in any <u>transaction with King County</u> in which you <u>participated</u> or for which you had responsibility?						
No Yes If yes, please answer the following additional questions:						
1) Name of each person engaged in any transaction with King County with whom the position was held.						
Cedar Valley PSO (non profit)						
2) Name of individual who held the position and their relationship to you.						
Ashley Byrd - self						
3) Title of the position held.						
Treasurer						
Describe the situation and provide any additional information regarding the position(s) for the Ethics Program's consideration below.						
I am the treasurer of a non-profit. I coordinated the non profit's 2020 application for the EGP. I did not review, comment, or vote on any decisions regarding the non-profit in my EGP committee capacity during the application review and approval period.						
D. Real Property  During the reporting period, did you, or a member of your <u>immediate family</u> possess a financial interest in any real property that was either involved in or the subject of a <u>King County action</u> ? Property for which the only <u>King county action</u> was valuation or revaluation for tax purposes does not have to be reported, <u>except that employees of the Department of Assessments and Board of Appeals who are required to file this statement shall report property for which valuation or revaluation actions were taken by King County during the reporting period.</u>						
No Yes If yes, please answer the following additional questions:						
1) Street address, parcel number, or legal description of real property involved in or subject of a King County action.						

2) Name of individual who possessed the financial interest and their relationship to you.								
3) Name of the King County department involved in the King County action								
Describe the situation and provide any additional information regarding the position(s) for the Ethics Program's consideration below.								
E. Declaration								
By filling out the information below, I affirm that I, Ashley Byrd, am signing this form and								
declaring under penalty of perjury under the laws of the State of washington that the foregoing is true, complete, and								
correct as of the date	DocuSigned by:							
Signature: S/	ashensprind							
9FF3A5A1B8084F1 Signature								
		(actual, typed and electronic signat	tures are all accepted	0				
01/26/2021		Lynnwood		WA				
Date		City	<u> </u>	State				