



**PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD**

Last Name	First	Middle Initial	DATE
EADIE	RICHARD	D	2012-03-24

- A OFFICE HELD, BUSINESS INTERESTS:** Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents
- (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or
  - (2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.
- Legal Name: Report name used on legal documents establishing the entity.
  - Trade or Operating Name: Report name used for business purposes if different from the legal name.
  - Position or Percent of Ownership: The office, title and/or percent of ownership held.
  - Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered.
  - Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received.
  - Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$10,000 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation.
  - Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met.

**ENTITY NO. 1**

Reporting For: Self  Spouse

Registered Domestic Partner  Dependent

**LEGAL NAME:**

Eadie Family Trust

**POSITION OR PERCENT OF OWNERSHIP**

Trustee

**TRADE OR OPERATING NAME:**

Eadie Family Trust

**ADDRESS:**

1455 NW 188th St

Shoreline

WA 98177

**BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:**

Ownership and management of real estate

**PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:**

Purpose of payments

Amount (actual dollars)  
 \$

**PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$10,000 OR MORE:**

Agency name:

Purpose of payment (amount not required)

**PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$10,000 OR MORE**

Customer name:

Purpose of payment (amount not required)

**WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$20,000. List street address, assessor parcel number, or legal description and county for each parcel):**