

MODIFICATION REQUEST COVER SHEET

Name of Filer	CLAIRE SUSSMAN
Reporting Period	<input checked="" type="checkbox"/> Annual report – calendar year 2013 <input type="checkbox"/> Candidate/Appointee report
Type of Request	<input type="checkbox"/> New <input checked="" type="checkbox"/> Renewal with No Change – <u>original granted on March 25, 2010</u> <input type="checkbox"/> Renewal with Change
Office Held/Sought & Term	District Court Judge, Pierce County Elected term expires December, 2014
PDC Protocol	<input type="checkbox"/> Attorney: Interpretation #02-03 <input checked="" type="checkbox"/> Judge / Judicial Candidate: Interpretation #02-04 <input type="checkbox"/> Automobile Dealership: Interpretation #02-05 <input type="checkbox"/> Spousal: Interpretation #02-06 <input checked="" type="checkbox"/> WAC 390-28-100(1)(d) Personal residence
Supporting Documents (attached)	<input checked="" type="checkbox"/> Current F-1 <input checked="" type="checkbox"/> Modification Application <input checked="" type="checkbox"/> Prior order (if renewal) – <u>Order #3106</u>
Reason(s) for Modification (as stated by filer)	<ul style="list-style-type: none"> • Judge Sussman is requesting a renewal of a reporting modification that would exempt her from disclosing her personal residential address information, including street address, parcel number, or legal description, on her Personal Financial Affairs Statement for 2013. • Judge Sussman is also requesting a renewal of a reporting modification that would exempt her from disclosing the address, parcel number, or legal description of real estate held in a family LLC in which she has an 18.6% ownership interest. • Judge Sussman stated that she presides over a variety of dockets that include persons charged with aggressive, violent and stalking behavior. She presides over cases including anti-harassment, domestic violence, and criminal assaults. She sentences people to extended time in jail and sets bail. She stated that persons that appear before her are often charged with violent, aggressive, and erratic behavior including threats and use of weapons. • Judge Sussman stated that as a former Prosecutor and Judge Pro Tem, she has always kept an unlisted address and that she is requesting a modification for the safety of her family. • Judge Sussman is also requesting a modification that would exempt her from disclosing the real estate address information concerning real estate owned by M & H Family RRE#2, LLC. She stated the property owned by this entity is the residential address of a family member. The family

	<p>member and Judge Sussman want to keep the address private due to concerns for safety.</p> <ul style="list-style-type: none">• Judge Sussman stated that the property is not located in Pierce County and she has no decision-making authority over this real estate.• Judge Sussman stated that disclosing the address of her personal residence creates a “manifestly unreasonable hardship” on her and her family, in light of the types of cases she presides over and the sentencing of people that have exhibited erratic, violent, and mental instability.
Other Issues	Judge Sussman disclosed creditor information, payment terms, security given and mortgage amounts for her personal residence.
Staff Recommendations	Approve renewal of the reporting modification with no changes.

Application Questionnaire

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Background Information

Filer Name: Claire SussmanFiler Office Held or Sought: Pierce County District Court Judge, Position 2Date of Request: 2/18/2014Period Covered by Request: 4/15/14-end of this reporting period

Questions

Please answer questions # 1 - # 8 below, unless:

- RESIDENTIAL ADDRESS. If you are seeking only nondisclosure of a residential address, answer # 1, # 4, # 6 and # 8.
- SPOUSAL SEPARATION. If you are seeking only nondisclosure of information related to your spouse based upon a recent or pending divorce or separation, or because it relates to a bona fide separate property agreement or other bona fide separate status, answer # 1, # 4, # 7 and # 8. A request for nondisclosure may be considered when such financial interest does not constitute a present or prospective source of income for you.

1. **MODIFICATION REQUEST SUMMARY. Describe the general nature of the information you do not wish to disclose.** (Examples: financial interests where reporting the name would likely adversely affect the competitive position of an entity, customer lists of a business entity or sources of compensation/income for the entity, confidential relationships, information subject to bona fide separate property agreements, personal residential address, other).

1. **Address of residence and family member's residence.**

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2. **UNREASONABLE HARDSHIP. Describe in detail the manifestly unreasonable hardship in disclosing the information.** Please describe in detail the reasons why you believe disclosing the information would be a hardship. The reasons stated should address the issues such as those listed below. Please address those topics below that are relevant to your specific request. For example, if you are seeking nondisclosure related to an entity, for each entity, please:

- Provide the name and description of the entity, business, union, association, not-for-profit, charitable organization, or other entity for which you are seeking a modification request from reporting the entity's disclosable customers/sources of compensation/income.
- Describe the size of the entity such as annual sales, number of customers or accounts, the number of employees, and other pertinent information.

- Describe how many business customers or other sources paying the entity more than \$10,000 would be subject to disclosure.
- Describe if you have access to information about the entity's customer base or sources of compensation/income.
- Describe if you are involved with the day-to-day operations of the entity.
- Describe if any of the entity's customers or sources of compensation/income are already listed in other public sources or publications including advertisements, or public records.
- Describe if any of the entity's customers or sources of compensation/income are already listed on a website.
 - If the entity has a website address, list it here:

- If the entity's customers or sources of compensation/income are described elsewhere on the Internet, describe why you are seeking a modification (nondisclosure) for those customers or sources of compensation/income:

[*Note:* along with other information provided in the Application Questionnaire, Internet information regarding entities/sources of compensation/income may be reviewed by PDC staff and/or the Commission as part of the modification process.]

- Describe if the entity has the ability to sort its customer list or sources of compensation/income to identify those paying the entity more than \$10,000 during the reporting period.
- Describe if you disclosed all of the governmental customers or governmental sources of compensation/income that paid the entity more than \$10,000 in the reporting period.
- Indicate whether you have an ownership interest of 10% or more in the entity.
- Indicate whether your spouse's interest in an entity requires you to complete an F-1 Supplement for that entity.
- Describe other relevant information you believe the Commission should consider as to why it would be a manifestly unreasonable hardship if the information was required to be disclosed.



3. **NOT FRUSTRATE THE PURPOSES OF THE ACT.** Describe how allowing you to not disclose the information described in your modification request does not frustrate the purposes of the Public Disclosure Act.

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Washington

4. **DUTIES. Describe your duties as an elected or appointed official.** Please describe the jurisdiction or agency for which you hold public office, and the duties performed by you as a public official (examples: adopting rules or ordinances, hiring staff, approving contracts, setting policy, etc.). Please provide as much description as possible.

My current job responsibilities as a District Court Judge include presiding over a variety of dockets that include persons charged with aggressive, violent and stalking behavior. I preside over anti-harrassment cases as well as criminal assaults. It is not uncommon for the public to be angry about decisions to have no contact orders placed against them or loved ones. I sentence people to extended time in jail and set bail to ensure the safety of the public and alleged victims. The defendants that come before me are often charged with violent and erratic behavior, threats or use of knives, and threats to kill. As a Judge, I work regularly with these types of issues and the issues themselves, the volatility of these cases, and the often mental instability of some charged pose a threat to myself and family.

In addition, as a former prosecutor I have always kept an unlisted address for the safety of myself and family, and wish to continue to do so for our continued safety.

5. **CUSTOMERS OR SOURCES OF COMPENSATION/INCOME.** If you are seeking a modification related to a particular entity's reportable customers or sources of compensation/income for an entity, describe:
- In detail the position you hold in the entity (examples: owner, board member, officer, partner, etc.) and the duties performed by you for that entity, if any (examples: setting policy, hiring, approving contracts, approving budgets, etc.). Please provide as much description as possible.
 - If you (or if you are seeking office, will you) make any decisions as a public official that may benefit the customers of the entity for which you are seeking a modification, or sources of compensation/income for the entity for which you are seeking a modification?

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6. **RESIDENTIAL ADDRESS.** Are you requesting to be exempted from disclosing the address of your personal residence in the Real Estate Section of the F-1? In this situation, you or your spouse may be a law enforcement officer, prosecutor, judge, or other official, and the disclosure of the address of your primary residence on the F-1 form could cause you or your family harm, based upon tangible evidence or a specific threat. If so, please explain in detail the **manifestly unreasonable hardship** if disclosure were required, and **why the purposes of the act would not be frustrated** if disclosure of the address was not required. If nondisclosure is based upon an anti-harassment or similar court order, please state.

I am seeking two reporting modifications. (1) for my residential address, and (2) for the out of county address of a family member.

(1) As to my residential address: It is a manifestly unreasonable hardship to disclose the identity of my home and family's address in light of the types of cases that I preside over as a District Court Judge. The types of cases that I preside over include violent and stalking offenses, and people exhibiting erratic and violent behavior, and certified mental health issues. The very nature of the types of cases I hear, the types of decisions I make ordering Anti-Harassment Orders, setting bail because I find that a person is a risk to the community and the alleged victim, sentencing to time in jail due to history of criminal behavior would make it an unreasonable hardship to disclose my residence.

The purposes of the act are not frustrated, I will disclose the lending institution and the value of the home. There is no conflict of interest, the nondisclosure of my physical address does not affect my impartiality.

(2) As to my family member's address on the F-1 Supplement, entity #5, this family member wants to keep the address private due to concern for safety due to the reasons already stated above, but also due to their own privacy concerns. This real estate is not located in Pierce County, thus there is no issue of conflict of interest, and I have absolutely no decision making authority over this real estate.

7. **SPOUSAL SEPARATION.** Are you requesting to be exempted from disclosing information related to your spouse based on a pending or recent divorce or separation, or bona fide separate property agreement or other bona fide separate status? In this situation, the filer has little or no knowledge of spouse's or former spouse's

income, assets, liabilities or relationship to outside entities for which reporting may be required. (For example, do you file separate income tax returns?) The filer does not have access to spouse's or former spouse's financial information. The financial interest of the spouse or former spouse does not constitute a present or prospective source of income for the filer. If this is your situation, please describe.



8. **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.)

No



> IF YOU WILL NOT BE ATTENDING THE HEARING IN PERSON OR BY PHONE TO ATTEST THE ABOVE INFORMATION AND RESPOND TO COMMISSION QUESTIONS, YOU MUST ALSO COMPLETE AND SIGN THE ATTACHED CERTIFICATION PRIOR TO SUBMISSION.

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**Certification for an Application for a
Reporting Modification or Suspension
When Applicant Is Waiving Personal Appearance
At the Hearing
(Notary Not Required)**

I am waiving my personal appearance at the hearing on my request for a reporting modification or suspension, and request the Commission to consider my written application. I certify (or declare) 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: February 18, 2014

Entity or name of individual requesting reporting modification: Claire Sussman

Your signature: 

Your printed name: Claire Sussman

Business street address: 930 Tacoma Ave. S., Room 239,

City, state and zip code: Tacoma, WA 98402

Telephone number: (253) 798 - 6627

E-Mail Address: csussma@co.pierce.wa.us

Date Signed:  3/1/2014

Place Signed (City and County): Puyallup City WA County Pierce

*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."

IF YOU FAX OR SCAN AND SEND A COPY OF THIS SIGNED CERTIFICATION VIA E-MAIL TO THE PDC WITH YOUR MODIFICATION REQUEST, THE ORIGINAL MUST STILL BE PROVIDED. RETURN THE ORIGINAL OF THIS CERTIFICATION TO:

WASHINGTON STATE PUBLIC DISCLOSURE COMMISSION
711 Capitol Way Room 206
P.O. Box 40908
Olympia, WA 98504-0908
Attn: Reporting Modification Request

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.

A. Name and address of each bank or financial institution in which you, a family member, including registered domestic partner, had an account over \$20,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Charles Schwab 1148 Broadway, Suite 110 Tacoma, WA 98402	Brokerage	C	A
B. Name and address of each insurance company where you, a family member, including registered domestic partner, had a policy with a cash or loan value over \$20,000 during the period. None		DATE FILED PDC MAR - 4 2014	
C. Name and address of each company, association, government agency, etc. in which you, a family member, including registered domestic partner, owned or had a financial interest worth over \$2,000. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self-directed an investment account identify each stock or other asset in that account. See Attached Separate Sheet			

Check here if continued on attached sheet.

4 CREDITORS List each creditor you or a family member, including registered domestic partner, owed \$2,000 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2. **AMOUNT (USE CODE)**

Creditor's Name and Address	Terms of Payment	Security Given	Original	Present
Chase Auto Finance P.O. Box 94932 Cleveland OH 44101-4932	5.5 yr @ 5.94%	Auto Loan	B	A

Check here if continued on attached sheet.

5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.

Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

- A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? Yes If yes, complete Supplement, Part A.
- B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? Yes If yes, complete Supplement, Part A.
- C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? Yes If yes, complete Supplement, Part A.
- D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for compensation or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? NO If yes, complete Supplement, Part B.
- E. Only for Persons Filing Annual Report. Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? NO (or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? NO If yes to either or both questions, complete Supplement, Part C.

ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.

- I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.
- I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.

*CANDIDATES: Do not use public agency addresses or telephone numbers for contact information.

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

 3/1/2014
 Signature Date

Contact Telephone: (253) * 798-6627

Email: ~~csussma~~ CSUSSMA@CO.PITCO.WA.US (work) *

Email: _____ (Home) Optional

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**Claire Sussman F-1 Attachment regarding Assets/Investments
Interest/Dividends**

<u>3.C.Assets/Investments</u>	<u>Type of Account</u>	<u>Asset Value</u>	<u>Income Amt</u>
Black& Decker Corp	Stock	B	A
Hewlett Packer Co.	Stock	D	A
Microsoft Corp	Stock	E	A
Schlumberger	Stock	B	A
Dodge & Cox Balanced Fund	Mutual Fund	A	none
Hennessy Small Cap	Mutual Fund	B	none
Jensen Portfolio Class J	Mutual Fund	B	none
Meridian Contrarian Fund	Mutual Fund	B	none
Oakmark Equity Income Fund	Mutual Fund	B	none
T Rowe Price Capital	Mutual Fund	B	none
Vanguard Wellesley	Mutual Fund	B	none
T Rowe Price Capital	IRA	A	none
Vanguard 500 Index fund	IRA	B	none
Amazon Com Inc	IRA	A	none
Harley Davidson, Inc	IRA	A	none
Express Scripts Holding	IRA	A	none
Merck and Company	IRA	A	none
Starbucks Corp	IRA	A	none
Time Warner	IRA	A	none
Xerox	IRA	A	none
Public Emp Retirement	PERS 2	D	none

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PDC FORM
F-1
 SUPPLEMENT
 (1/12)

SUPPLEMENT PAGE
PERSONAL FINANCIAL AFFAIRS STATEMENT

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

Last Name Sussman	First Claire	Middle Initial R	DATE 3/1/2014
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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: Birnbaum Law Offices POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME: Spouse-Partner 100%

ADDRESS: 112 West Meeker, Puyallup, WA

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:
 Law Office

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 None \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$10,000 OR MORE:
 Agency name: Purpose of payment (amount not required)
 None

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$10,000 OR MORE
 Customer name: Purpose of payment (amount not required)
 Hall

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):
 None

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGE

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Name: Claire Sussman
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ENTITY NO. 2
 Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: Compass Property Solutions, LLC
 TRADE OR OPERATING NAME:
 ADDRESS: 112 West Meeker, Puyallup, WA 98371
 POSITION OR PERCENT OF OWNERSHIP: 100%

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:
 Real Estate Investment

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments: None
 Amount (actual dollars): \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$10,000 OR MORE:
 Agency name: None
 Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$10,000 OR MORE:
 Customer name: None
 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):
 1040 S Meyers, Tacoma, WA 98466

Check here if continued on attached sheet

B LOBBYING: List persons for whom you, or any immediate family member, including registered domestic partner, lobbied or prepared state legislation or state rules, rates, or standards for compensation or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)

Check here if continued on attached sheet

C FOOD TRAVEL SEMINARS: Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	

Check here if continued on attached sheet

Information Continued

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Name **Claire Sussman**

ENTITY NO. **3** Reporting For: Self Spouse
Registered Domestic Partner Dependent

LEGAL NAME: **Downtown Puyallup Law Center, LLC** POSITION OR PERCENT OF OWNERSHIP
TRADE OR OPERATING NAME: **Managing Member 25%**
ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:
Own and Manage Commercial Real Estate

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
Purpose of payments **None** Amount (actual dollars)
\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$10,000 OR MORE:
Agency name: **None** Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$10,000 OR MORE
Customer name: **A Formal Choice** Purpose of payment (amount not required)
Adam Birnbaum **Rent**
Rent

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):

112 West Meeker, Puyallup, WA 98371

B LOBBYING: (Continued)

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)

C FOOD TRAVEL SEMINARS (continued)

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	

COPY

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Information Continued

F-1 Supplement

Name
Claire Sussman

ENTITY NO. 4

Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME: M & H Family LLC

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

39.61%

ADDRESS: PO Box 50064 Bellevue, WA 98015-0064

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Management of Financial Investments

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

Purpose of payments

Amount (actual dollars)

None

\$

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

Agency name:

Purpose of payment (amount not required)

None

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

Customer name:

Purpose of payment (amount not required)

None

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

None

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Information Continued

F-1 Supplement

Name

Claire Sussman

ENTITY NO. 5

Reporting For: Self Spouse Registered Domestic Partner Dependent LEGAL NAME: **M&H FAMILY RRE#2, LLC**

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

18.6%ADDRESS: **PO Box 50064 Bellevue, WA 98015-0064**

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Managing Real Estate Investment

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

Purpose of payments

Amount (actual dollars)

None

\$

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

Agency name:

Purpose of payment (amount not required)

None

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

Customer name:

Purpose of payment (amount not required)

None

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):

Reporting Modification Sought

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Information Continued

F-1 Supplement

Name

Claire Sussman

ENTITY NO. 6

Reporting For: Self Spouse Registered Domestic Partner Dependent

LEGAL NAME: M&H FAMILY IRE#3, LLC

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

16.08%

ADDRESS: PO Box 50064 Bellevue, WA 98015-0064

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Managing Real Estate Investment

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

Purpose of payments

Amount (actual dollars)

None

\$

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

Agency name:

Purpose of payment (amount not required)

None

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

Customer name:

Purpose of payment (amount not required)

None

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):

King County 068590 0040 05

King County 258940 0250 04

Name **Claire Sussman**

ENTITY NO. **7**

Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME: **Charles Wright Academy**

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

Spouse-Trustee

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Non-profit School

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

Purpose of payments

Amount (actual dollars)

None

\$

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

Agency name:

Purpose of payment (amount not required)

None

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

Customer name:

Purpose of payment (amount not required)

None

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):

7723 Chambers Creek Road West, Tacoma, WA

Check here if continued on attached sheet

B LOBBYING: List persons for whom you or any immediate family member, including registered domestic partner, lobbied or prepared state legislation or state rules, rates, or standards for compensation or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered

Description of Legislation, Rules, Etc.

Compensation (Use Code)

Check here if continued on attached sheet

C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
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\$

Check here if continued on attached sheet

Information Continued

COPY

F-1 Supplement MAR - 4 2014

Name Claire Sussman

ENTITY NO. 8

Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME: Temple Beth El

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

Spouse-Trustee

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Non-profit Congregation

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

Purpose of payments

Amount (actual dollars)

None

\$

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

Agency name:

Purpose of payment (amount not required)

None

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

Customer name:

Purpose of payment (amount not required)

None

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):

5975 S.12th Street, Tacoma, WA

B LOBBYING: (Continued)

Person to Whom Services Rendered

Description of Legislation, Rules, Etc.

Compensation (Use Code)

C FOOD TRAVEL SEMINARS (continued)

Date Received

Donor's Name, City and State

Brief Description

Actual Dollar Amount

Value (Use Code)

\$



STATE OF WASHINGTON

PUBLIC DISCLOSURE COMMISSION

711 Capitol Way Rm. 206, PO Box 40908 • Olympia, Washington 98504-0908 • (360) 753-1111 • FAX (360) 753-1112
Toll Free 1-877-601-2828 • E-mail: pdc@pdc.wa.gov • Website: www.pdc.wa.gov

BEFORE THE PUBLIC DISCLOSURE COMMISSION
OF THE STATE OF WASHINGTON

IN THE MATTER OF THE APPLICATION)	PDC No. 3106
OF CLAIRE SUSSMAN FOR A)	Findings, Conclusions
REPORTING MODIFICATION)	and Order
<hr/>		

On April 25, 2013, the application of Claire Sussman, 930 Tacoma Avenue South, Room 239, Tacoma, Washington 98402, for a modification of the reporting requirements of RCW 42.17.710 was brought before the Public Disclosure Commission.

Consideration of the request was made pursuant to RCW 42.17A.120 and chapter 390-28 WAC by the Commission. The proceedings were held in Room 206, Evergreen Plaza Building, 711 Capitol Way, Olympia, Washington, 98504. The applicant, Claire Sussman, by Modification Application, requested a renewal of the reporting modification that would exempt her from disclosing her personal residential address information, including street address, parcel number, or legal description, on her Personal Financial Affairs Statement for 2012. Judge Sussman also requested a renewal of a reporting modification that would exempt her from disclosing the address, parcel number, or legal description of real estate owned by M & H Family RRE#2, LLC, for whom she is a trustee.

The Commission was provided with a certification from Judge Sussman waiving her personal appearance at the hearing and stating that the facts contained in the request are true and accurate.

FINDINGS OF FACT

Based upon the Modification Application, the Commission makes the following Findings of Fact:

1. Judge Sussman has previously been granted the requested reporting modification, the most recent being Order No. 3050.
2. Judge Sussman is a District Court Judge for Pierce County, Washington. Her current elected term of office expires in December 2014.
3. Judge Sussman stated that she presides over a variety of dockets that include persons charged with aggressive, violent and stalking behavior. She presides over cases including anti-harassment, domestic violence, and criminal assaults. She sentences people to extended time in jail and sets bail. She stated that persons that appear before her are often charged with violent, aggressive, and erratic behavior including threats and use of weapons.
4. Judge Sussman stated that as a former Prosecutor and Judge Pro Tem, she has always kept an unlisted address and that she is requesting a modification for the safety of her family.
5. Judge Sussman stated that the property owned by a family trust, M & H Family RRE#2, LLC, of which she has an 18.6% ownership interest, is not located in Pierce County and she has

no decision-making authority over this real estate. She stated the property owned by this entity is the residential address of a family member. The family member and Judge Sussman want to keep the address private due to concerns for safety.

6. Judge Sussman stated that disclosing the addresses creates a manifestly unreasonable hardship on her and her family, in light of the types of cases she presides over and the sentencing of people that have exhibited erratic and violent behaviors, and mental instability.

CONCLUSIONS OF LAW

Having made these Findings of Fact, the Commission makes the following Conclusions of Law:

1. Literal compliance with all the provisions of the reporting requirements of RCW 42.17A.710 would work a manifestly unreasonable hardship on the applicant.
2. Limited suspension or modification of the reporting requirements as specified in the Order would not frustrate the purposes of the Act in this particular case.

ORDER

Having made these Findings of Fact and Conclusions of Law, the Commission issues the following Order:

For the Statement of Personal Financial Affairs covering 2012 required to be filed with the Public Disclosure Commission between January 1 and April 15, 2013:

1. The applicant may satisfy the reporting requirements of RCW 42.17A.710(1)(j) with respect to her personal residence by providing the assessed value, creditor information, payment terms, security given and mortgage amount codes.
2. The applicant may satisfy the reporting requirements of RCW 42.17A.710(1)(k) with respect to real estate held by M & H Family RRE#2, LLC by disclosing the county in which the property is located.
3. In all other matters required to be reported, the applicant shall comply in full with the reporting requirements of RCW 42.17A.

DATED this 20TH day of May, 2013.

FOR THE PUBLIC DISCLOSURE COMMISSION

Andrea M. Doyle
Andrea McNamara Doyle
Executive Director

I, <u>JANA GREEN</u> certify that I mailed a copy of this order to the Respondent/Applicant at his/her respective address postage pre-paid on the date stated herein.
Signed <u>[Signature]</u>
Date <u>5/20/13</u>