

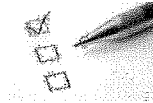
MODIFICATION REQUEST COVER SHEET

| | |
|--|--|
| Name of Filer | DANIEL J. SHIH |
| Reporting Period | <input type="checkbox"/> Annual report <input checked="" type="checkbox"/> Candidate – February 2015 to February 2016 |
| Type of Request | <input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal with No Change <input type="checkbox"/> Renewal with Change |
| Office Held/Sought & Term | Candidate for State Representative, 43 rd Legislative District If elected term would begin January 2017 |
| Application Rule(s) | <input type="checkbox"/> Income & Ownership Interest: WAC 390-28-100(b) <input type="checkbox"/> Personal Residence: WAC 390-28-100(d) <input checked="" type="checkbox"/> Attorney: WAC 390-28-100(1)(e)(i) <input type="checkbox"/> Judge / Judicial Candidate: WAC 390-28-100(1)(e)(ii) <input type="checkbox"/> Spousal: WAC 390-28-100(1)(e)(iv) <input type="checkbox"/> Other: WAC 390-28-100(1)(a)(c) |
| Explanation of Rule | <p>Lawyers and law firms (when applicant is an incumbent or candidate and acts alone or as part of a governing body, board, or commission). An applicant may be allowed to satisfy the reporting requirements of RCW <u>42.17A.710</u> (1)(g)(ii) and WAC <u>390-24-020</u> by disclosing reportable clients from whom compensation has been paid in excess of the reporting threshold as follows:</p> <p>(A) The names of the business clients for whom the applicant has done legal work;</p> <p>(B) Other clients of the law firm whose interests are significantly affected by the applicant's actions as an elected or appointed official or whose actions will be affected by the applicant's action should the applicant be elected whose identities become known to the applicant through any means;</p> <p>(C) The names of the clients of the law firm who are listed in Martindale Hubbell, the firm's resume, web site, or similar promotional materials; and</p> <p>(D) Governmental clients that have done business with the law firm.</p> <p>An applicant may also be required to disclose all business customers from whom compensation in excess of the reporting threshold has been received whose identities are publicized or referenced in documents open for public inspection at the courts, in administrative hearings, at proceedings conducted by public agencies, or are a matter of public knowledge in other similar public forums. Alternatively, the commission may require an applicant to report only those publicly identifiable customers of which the applicant is aware.</p> |
| Supporting Documents (attached) | <input checked="" type="checkbox"/> Current F-1 <input checked="" type="checkbox"/> Modification Application <input type="checkbox"/> Prior Order (if renewal) |
| Reason(s) for Modification (as stated by filer) | <ul style="list-style-type: none"> • Mr. Shih is requesting a reporting modification that would exempt him from disclosing the business customers that paid \$12,000 in the previous 12 months to Susman Godfrey LLP, a law firm. • Mr. Shih is an attorney with Susman Godfrey with a 0.40% ownership. He said the firm has offices in five cities with approximately 115 attorneys and 100 non- |

| | |
|------------------------------|---|
| | <p>attorney staff. He said he is not a managing partner or part of the firm's Executive Committee.</p> <ul style="list-style-type: none">• Mr. Shih stated that he does not perform any legal work for a majority of the firm's clients. He stated that if elected, his service in the Washington State Legislature would not affect most of the firm's clients since many of the clients are outside of Washington.• Mr. Shih provided a list disclosing his clients, clients whose interests would be significantly affected by his actions if elected as a State Representative, clients who are identified in court files or other public sources, and the firm's governmental clients. (See Attachment Exhibit A) |
| Staff Recommendations | Approve the requested reporting modification. |

Washington State Public Disclosure Commission
Personal Financial Affairs Statement
Reporting Modification Application Questionnaire, Instructions And Certification
June 2015

DATE FILED PDC



FEB 16 2016

Application Questionnaire Instructions

The purpose of the Public Disclosure Act in chapter RCW 42.17A includes at RCW 42.17A.001(3):

“That the people shall be assured that the private financial dealings of their public officials, and of candidates for those offices, present no conflict of interest between the public trust and private interest.”

The form for providing disclosures of financial affairs is the F-1 Personal Financial Affairs Statement. The Act also provides for a process to seek a modification or suspension of reporting some information. RCW 42.17A.110(10) states in part:

*“After hearing, by order approved and ratified by a majority of the membership of the commission, [the commission is empowered to] suspend or modify any of the reporting requirements of this chapter in a particular case if it finds that literal application of this chapter works a **manifestly unreasonable hardship** and if it also finds that the suspension or modification will not **frustrate the purposes of the chapter...***

... Any suspension or modification shall be only to the extent necessary to substantially relieve the hardship. The commission shall act to suspend or modify any reporting requirements only if it determines that facts exist that are clear and convincing proof of the findings required under this section.” (Emphasis added).

Possible qualifications for modifications or suspensions (referred to collectively as “modifications”) are found at RCW 42.17A.110(10) and WAC 390-28-100. Copies of these provisions and reporting requirements are on the PDC’s website at www.pdc.wa.gov under “Laws and Rules.” The *Personal Financial Affairs Statement Instruction Manual* is also available on the website, under “Filer Resources – Manuals and Brochures.” The Commission has also adopted Interpretations addressing modifications for certain professions and situations, and those are also available under “Laws and Rules” then “Interpretations.” Modifications, if granted by the Commission, cover only one reporting period. Another application must be made in the following years if you still need a modification.

PDC staff has implemented this application procedure for filers requesting an F-1 Reporting Modification from the Commission. This is designed to provide more uniform information to the Commission from filers seeking a modification, and to enable a quicker response to possible questions about a request from the Commission at the hearing. **Please fill out this Application Questionnaire prior to having a modification request taken to the full Commission for consideration.** The blanks in this document will expand to accommodate your answers. **It is suggested that you review this entire Application Questionnaire first, before filling out your answers.**

✓ **If you are requesting a modification, whether new or a renewal of an earlier request, please:**

- (1) **Complete or review** your filed Personal Financial Affairs Statement (PDC Form F- 1) including Supplemental attachments (*except* for the information for which you are seeking a modification – leave the relevant sections or lines blank on the F-1 form at this time);
- (2) **Answer all questions (# 1 – # 8)** on this Application Questionnaire, unless otherwise directed below,
- (3) **Confirm whether you authorize the PDC to use email may correspond with you about your request by email:**
- (4) **Sign the Certification** if you do not intend to be present at the Commission hearing on your modification request, and
- (5) **Return** this Application Questionnaire to the PDC via e-mail, mail, fax or other delivery (and also send the original of the Certification to the PDC).

- Please note, however, that while this Application Questionnaire for filers seeking a modification can be returned to the PDC in several ways, **F-1 forms cannot be filed by fax or e-mail**. See filing instructions in the *Personal Financial Affairs Statement Instruction Manual*.

✓ **Other items to consider:**

- Filers for which a PDC Interpretation may apply. As noted, the Commission has adopted Interpretations for specific filers that are requesting modifications. Those filers include attorneys, automobile dealers, judges and judicial candidates, and spouses of elected and appointed officials, and also include candidates for public office. If you qualify as a filer under an Interpretation, please review the applicable Interpretation and provide the information pursuant to the Interpretation as part of your F-1 or F-1 Supplement forms. Copies of the Interpretations are available on the PDC website at www.pdc.wa.gov under "Laws & Rules" then "Interpretations."
- Competitive disadvantage. If you are claiming a competitive disadvantage (in disclosing information), you must describe in detail the competitive environment in which the entity operates and explain how disclosure would likely affect the competitive position of the entity.

✓ **Please carefully review your F-1 and/or F-1 Supplement to ensure each form is fully completed.** Here are some commonly overlooked areas:

- Do you make the buy and sell decisions with regard to the IRA's, stocks and other securities listed as retirement or income generating assets in Section 3c of your F-1? **If the answer is YES** (if you control the buy and sell decisions) **you must identify the individual securities or mutual funds held.**
- Did you disclose all of your retirement accounts (i.e. IRA, 401 k, deferred compensation, PERS 1, 2, 3 or TRS or LEOFF, etc.)?
- Did you complete all of the questions in Section 5 of the F-1?

Questions? If you have questions, you may contact PDC staff at (360) 753-1111; 1-877-601-2828 (toll-free in Washington State). The PDC Fax number is: (360) 753-1112. E-mail: pdc@pdc.wa.gov. The PDC address is on the last page of this form (Certification).

Application Questionnaire

Background Information

Filer Name: Daniel J. Shih

Filer Office Held or Sought: Washington State House, 43rd LD, Position 1

Date of Request: February 15, 2016

Period Covered by Request: February 16, 2015 - February 15, 2016

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. **EMAIL AUTHORIZATION.** Check the box below to give the PDC permission to provide future correspondence about your request – including hearing orders – to you by email.

I authorize the PDC to provide future correspondence to me email rather than sending it through the U. S. mail.

Email address: me@danshih.com

2. **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).

I request a modification of the otherwise-applicable requirements for reporting sources of compensation for a law firm under the PDC's protocol for attorneys as expressed in PDC Interpretation No. 02-03 (amended March 12, 2012) (now codified at WAC 390-28-100). As WAC 390-28-100 provides, I am requesting permission to disclose only reportable business clients from whom compensation has been paid in excess of the

reporting threshold in the following categories: (1) business clients for whom I have personally done legal work, (2) other clients of the law firm whose interests would be significantly affected by my actions as a Representative whose identities become known to me or of which I become aware by any means, (3) clients of the law firm who are listed on Martindale-Hubbell, the firm's website, or other promotional materials, and (4) governmental clients who have done business with the law firm.

I specifically request that the PDC find, as WAC 390-28-100 foresees, that it would create an undue hardship for me to report, in addition to the categories listed above, clients whose identities can be discovered through examination of documents open for public inspection of the courts, in administrative hearings, at proceedings conducted by public agencies, or that are a matter of public knowledge in other similar public forums. I do not routinely (or ever) review court filings across the country or similar documents for the names of our firm's clients, and it would be very time-consuming (and likely practically impossible) me to do so.

I am requesting this modification for sources of compensation from February 16, 2015 through February 15, 2016.

3. **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.

Susman Godfrey LLP

- Describe the size of the entity such as annual sales, number of customers or accounts, the number of employees, and other pertinent information.

Susman Godfrey LLP is a law firm with offices in five cities and approximately 115 attorneys and approximately 100 non-attorney staff.

- Describe how many business customers or other sources paying the entity more than \$12,000 would be subject to disclosure.

If the ordinarily applicable disclosure requirements applied, over 20 persons or entities would be disclosed for the reporting period.

- Describe if you have access to information about the entity's customer base or sources of compensation/income.

I can request our accounting department to compile this information.

- Describe if you are involved with the day-to-day operations of the entity.

I practice law with Susman Godfrey LLP, but I am not a managing partner of the firm, nor am I part of the firm's Executive Committee.

- 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.

Yes, some of the firm's clients are identified in public records.

- Describe if any of the entity's customers or sources of compensation/income are already listed on a website.

Yes, some of the firm's clients are disclosed on the Susman Godfrey website. I have disclosed clients who paid Susman Godfrey amounts in excess of the reporting threshold for the relevant period who are also identified as clients on the Susman Godfrey website on the attached Exhibit A.

- If the entity has a website address, list it here:
www.susmangodfrey.com
- 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:

Yes, some of the firm's clients are described elsewhere on the Internet; I would expect that all clients described elsewhere on the Internet are also disclosed on the Susman Godfrey website, and I have disclosed the clients identified on the Susman Godfrey website who paid Susman Godfrey amounts in excess of the reporting threshold for the relevant period in the attached Exhibit A.

[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 \$12,000 during the reporting period.

Yes

- Describe if you disclosed all of the governmental customers or governmental sources of compensation/income that paid the entity more than \$12,000 in the reporting period.

Yes

- Indicate whether you have an ownership interest of 10% or more in the entity.

No

- Indicate whether your spouse's interest in an entity requires you to complete an F-1 Supplement for that entity.

No

- 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.

I do not perform any legal work for the overwhelming majority of the clients of Susman Godfrey LLP. I am not a managing partner of the firm, nor do I serve on the firm's Executive Committee. My service in the Washington State Legislature would not significantly affect the interests of many (perhaps most) of our firm's clients, particularly as many of our clients are outside of Washington state.

Point 3 of former PDC Interpretation 02-03 (now codified at WAC 390-28-100) states that the PDC may find it creates an unreasonable hardship to disclose reportable business clients when (i) their identities are referenced in documents open for public inspection, including documents in courts, (ii) their identities are disclosed in documents made available for public inspection in open public meetings, (iii) identities are public knowledge in other similar public forums. It may, in theory, be possible for me to find out whether particular clients have been disclosed as firm clients publicly in the various ways that PDC Interpretation 02-03 anticipates—for example, by examining court records or by querying each of my law partners individually about the particulars of specific engagements. But I respectfully submit that it would create an unreasonable hardship for me to go through this exercise: it would be enormously time-consuming and serve very little purpose when I have already disclosed all the clients whose relationship with our firm is public on our website. I therefore request that the PDC find that it would create an undue hardship for me to make this disclosure. The modified disclosure envisioned by WAC 390-28-100 serves the purposes of the Disclosure Act while guarding against unreasonable hardship.



4. **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.

The modification I seek is precisely the type of modification anticipated by WAC 390-28-100. The purposes of the Act include ensuring the public's access to information about potential conflicts of interest. WAC 390-28-100 furthers this purpose by requiring disclosure of reportable business clients from whom compensation has been paid in excess of the reporting threshold in the following categories: (1) business clients for whom I have personally done legal work, (2) other clients of the law firm whose interests would be significantly affected by my actions as a Representative whose identities become known to me or of which I become aware by any means, (3) clients of the law firm who are listed on Martindale-Hubbell, the firm's website, or other promotional materials, and (4) governmental clients who have done business with the law firm. WAC 390-28-100 rests on the proposition that disclosure of clients in these categories adequately fulfills the purposes of the Act, and I have disclosed these reportable business clients in the attached Exhibit A.



Washington

5. **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.

N/A



6. **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.

I am a partner with Susman Godfrey LLP; however, I am neither a managing partner of the firm nor a member of the firm's Executive Committee.

- 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?

No. Clients whose interests could be significantly affected by my actions as a Representative of whom I have become aware (if any) are disclosed in the attached Exhibit A, as provided in WAC 390-28-100.



7. **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.

N/A



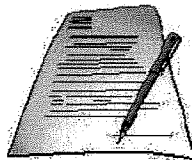
- 8. **SPOUSAL SEPARATION.** Are you requesting to be exempted from disclosing information related to your spouse based on a pending or recent divorce or separation, or bona fide separate property agreement or other bona fide separate status? In this situation, the filer has little or no knowledge of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

N/A



- 9. **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.)

Attached as Exhibit A is the list of clients who I propose to disclose pursuant to this modification request, following the guidelines in WAC 390-28-100.



➤ **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.**

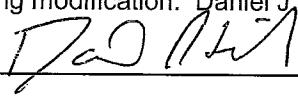
**Certification for an Application for a
Reporting Modification or Suspension
When Applicant Is Waiving Personal Appearance
At the Hearing
(Notary Not Required)**

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 15, 2016

Entity or name of individual
requesting reporting modification: Daniel J. Shih

Your signature: _____



Your printed name: Daniel J. Shih

Business street address: 1201 Third Avenue, Suite 3800

City, state and zip code: Seattle, WA 98101

Telephone number: (206) 319-2800

E-Mail Address: me@danshih.com

Date Signed: 2/15/2016

Place Signed (City and County):

Seattle
City

King
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."

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

Refer to instruction manual for detailed assistance and examples.

Deadlines: Incumbent elected and appointed officials -- by April 15.
 Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.

SEND REPORT TO PUBLIC DISCLOSURE COMMISSION

| DOLLAR CODE | AMOUNT |
|-------------|-----------------------|
| A | \$1 to \$4,499 |
| B | \$4,500 to \$23,999 |
| C | \$24,000 to \$47,999 |
| D | \$48,000 to \$119,999 |
| E | \$120,000 or more |

Last Name Shih, Daniel J. First Middle Initial

Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.

Theodore S. MacGovern

Mailing Address (Use PO Box or Work Address) *
98 Union Street #205

City Seattle County King Zip + 4 98101-2060

Filing Status (Check only one box.)

An elected or state appointed official filing annual report

Final report as an elected official. Term expired: _____

Candidate running in an election: month November year 2016

Newly appointed to an elective office

Newly appointed to a state appointive office

Professional staff of the Governor's Office and the Legislature

Office Held or Sought

Office title: state representative

County, city, district or agency of the office, name and number: LD 43 - House

Position number: 1

Term begins: 1/2017 ends: 12/2018

| 1 | INCOME | List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the period. Include stock options received during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3.) | | |
|--|---|---|--------------------|--|
| Show Self (S) Spouse (SP/DP) Dependent (D) | Name and Address of Employer or Source of Compensation | Occupation or How Compensation Was Earned | Amount: (Use Code) | |
| S | <u>Susman Godfrey L.L.P.</u> <u>1000 Louisiana Street #5100</u> <u>Houston, TX 77002-5096</u> | <u>attorney</u> | E | |
| Check Here <input type="checkbox"/> if continued on attached sheet | | | | |

2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)

| Property Sold or Interest Divested | Assessed Value (Use Code) | Name and Address of Purchaser | Nature and Amount (Use Code) of Payment or Consideration Received | |
|---|---------------------------|-------------------------------|---|--|
| Property Purchased or Interest Acquired | | Creditor's Name/Address | Payment Terms | Security Given Mortgage Amount - (Use Code) Original Current |
| All Other Property Entirely or Partially Owned See attachment | | | | |
| Check here <input checked="" type="checkbox"/> if continued on attached sheet | | | | |

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 \$24,000 any time during the reporting period. | Type of Account or Description of Asset | Asset Value (Use Code) | Income Amount (Use Code) |
|---|---|------------------------|--------------------------|
| See attachment | | | |
| 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 \$24,000 during the period. | | | |
| See attachment | | | |
| 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 \$2,400. 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 attachment | | | |

Check here if continued on attached sheet.

4 CREDITORS

List each creditor you or a family member, including registered domestic partner, owed \$2,400 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2.

| Creditor's Name and Address | Terms of Payment | Security Given | AMOUNT (USE CODE) | |
|---|------------------|----------------|-------------------|---------|
| | | | Original | Present |
| Check here <input type="checkbox"/> 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.

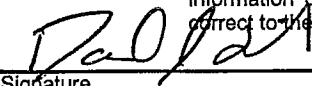
Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

- 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? **NO*** If yes, complete Supplement, Part A. *other than as a partner disclosed under A or B
- 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? **N/A** 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? **N/A** 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.

 2/15/2016
 Signature Date

Contact Telephone: (206) * 319-2800
 Email: me@danshih.com (work) *
 Email: _____ (Home) Optional

ATTACHMENT TO PDC FORM F-1

NAME: Shih, Daniel J.

2 – REAL ESTATE

| All Other Property Entirely or Partially Owned | Assessed Value (Use Code) | Creditor's Name/Address | Payment Terms | Security Given | Mortgage Amount – Original/Current (Use Code) |
|--|---------------------------|-------------------------|---------------|----------------|---|
| King County Assessor Parcel 735620-0160-07 | E | No creditor | | | |
| King County Assessor Parcel 253883-1010-03 | E | No creditor | | | |
| King County Assessor Parcel 609450-0010-01 | E | No creditor | | | |

3 – ASSETS/INVESTMENTS – INTEREST/DIVIDENDS

A – Bank or Financial Institution

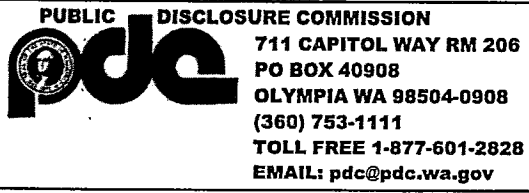
| Name and address | Type of Account or Description of Asset | Asset Value (Use Code) | Income Amount (Use Code) |
|---|---|------------------------|--------------------------|
| Ally Bank P.O. Box 951 Horsham, PA 19044 | Savings | E | A |
| American Express Bank P.O. Box 30384 Salt Lake City, UT 84130 | Savings | C | A |
| Chase P.O. Box 659749 San Antonio, TX 78265 | Checking Savings Savings | E E C | A A A |
| Citibank P.O. Box 769007 San Antonio, TX 78245 | Checking Savings | D D | A A |

B – Insurance

| Name and address | Type of Account or Description of Asset | Asset Value (Use Code) | Income Amount (Use Code) |
|---|---|------------------------|--------------------------|
| Pruco Life Insurance Company 213 Washington Street Newark, NJ 07102 | Life insurance | E | none |

C – Other Investments

| Name and address | Type of Account or Description of Asset | Asset Value (Use Code) | Income Amount (Use Code) |
|---|---|------------------------|--------------------------|
| AvalonBay Communities | Stock | E | B |
| Berkshire Hathaway Class B | Stock | E | C |
| Boston Properties | Stock | E | C |
| Equity Resident Properties | Stock | E | A |
| Plum Creek Timber | Stock | B | A |
| Schwab Emerging Market Equity ETF | ETF | E | B |
| Schwab Int'l Equity ETF | ETF | E | B |
| Schwab Int'l Small Cap Equity ETF | ETF | E | B |
| Schwab S&P 500 Index | Mutual fund | E | B |
| Schwab U.S. Aggregate Bond ETF | ETF | E | B |
| Schwab U.S. Broad Market ETF | ETF | E | B |
| Simon Property Group | Stock | E | B |
| SPDR Basic Industries | ETF | E | B |
| Vanguard Aggressive Growth Portfolio | 509 fund | D | A |
| Vanguard Inflation-Protected Securities | Mutual fund | C | A |
| Vanguard Inflation-Protected Securities Admiral | Mutual fund | E | B |
| Vanguard PRIMECAP Fund Admiral | Mutual fund | E | D |
| Vanguard REIT Index Admiral | Mutual fund | E | B |
| Vanguard Total Int'l Stock Index Admiral | Mutual fund | E | D |
| Vanguard Total Stock Market Index Admiral | Mutual fund | E | D |
| Vanguard Wellington Admiral | Mutual fund | E | D |
| WP Glimcher | Stock | B | A |



PDC FORM
F-1
SUPPLEMENT
(1/15)

SUPPLEMENT PAGE
PERSONAL FINANCIAL AFFAIRS STATEMENT

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

Last Name: **Shih, Daniel J.** First: Middle Initial: DATE: **2/15/2016**

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 \$12,000 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: **Susman Godfrey L.L.P.** POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME: **Partner, 0.40%**

ADDRESS: **1000 Louisiana Street #5100, Houston, TX 77002-5096**

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

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
Purpose of payments Amount (actual dollars)
\$ N/A

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
Agency name: Purpose of payment (amount not required)
See attached Exhibit A **Legal services**

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE:
Customer name: Purpose of payment (amount not required)
See attached Exhibit A **Legal services**

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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGE

ATTACHMENT TO PDC FORM F-1 SUPPLEMENT

NAME: Shih, Daniel J.

ENTITY 1 – EXHIBIT A

Note: I am one of over 100 attorneys at the firm, and as a result this list includes primarily other attorneys' clients for whom I have not personally done any legal work. Pursuant to disclosure requirements, this exhibit lists reportable business clients from whom compensation has been paid in excess of the reporting threshold in one or more the following categories: (1) business clients for whom I have personally done legal work, (2) other clients of the law firm whose interests would be significantly affected by my actions as a Representative whose identities become known to me or of which I become aware by any means, (3) clients of the law firm who are listed on Martindale-Hubbell, the firm's website, or other promotional materials, and (4) governmental clients who have done business with the law firm.

Ace Insurance
Amazon.com
Anadarko Petroleum Corporation
Apache Corporation
Arctic Slope Regional Corporation
Bass, Edward P.
Berck, Jonathan S.
Blucora, Inc.
Bracewell & Giuliani LLP
Cambridge Major Laboratories
Canrig Drilling Technology Ltd.
Cavalry Portfolio Services, LLC
Chevron
Churchill Downs Inc.
Circuit City Stores, Inc.
City of Highland Park, TX
City of Houston
City of Seattle
CNA Insurance
CoinLab Inc.
Cresta Technology Corporation
DataQuill Ltd.
David M. Kester
DDR Holdings, LLC
Dig Tech, Inc.
Dillard's
Encana Oil & Gas (USA)
Eni US Operating Co., Inc.
EP Energy E&P Company, L.P.
Estate of Charles J. Wyly, Jr.
First Presbyterian Church of Houston

Forest Oil Corporation
General Electric Capital Corporation
Genworth Financial, Inc.
Hazelrigg, T.R. IV
Trover Solutions Inc. d/b/a Healthcare Recoveries
Hess Corporation
Holley, Ronald R.
Huntleigh USA Corp.
InfoSpace LLC
Intellectual Ventures
IntercontinentalExchange, Inc.
IQ Products Company
Joe Brand, Inc.
Kaiser Foundation Health Plan, Inc.
KBR, Inc.
Kosmos Energy, Ltd.
L&M Arts
Lehman Brothers Europe Ltd.
Lehman Brothers International (Europe)
Lockton Companies, LLC
LyondellBasell Industries
Macquarie Bank Limited
McCourt, Frank
Mewbourne Oil Company
Molina, Carlos J.
Morris & Dickson Co., LLC
Moyes, Jerry
NASDAQ OMX Group, Inc.
Oak Hill Capital Partners, LP
Olympia Minerals LLC
OppenheimerFunds, Inc.
Personalized Media Communications LLC
PersonalWeb Technologies LLC
Platt, Ileana D.
Poly-America, L.P.
Quanta Services Inc.
Rockstar Consortium US LP
Selling Source LLC
Semiconductor Manufacturing International
Sensata Technologies, Inc.
Singing River Health System
Soverain Software LLC
Targa Resources Partners, LP
TGS NOPEC Geophysical Company, et al
The Rawlings Company LLC
Third Point LLC

Thornburg Mortgage, Inc.
T-Mobile USA, Inc.
TPG Capital, L.P.
Two-Way Media, LLC
Virgin America
Vitol, Inc.
Wal-Mart Stores, Inc.
Whistler Energy II LLC
Winthrop Resources Corporation
Zillow, Inc.

Name **Daniel J. Shih**

ENTITY NO. 2

Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME: **Crestwood Partners LLC**

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

Member, 35.625%

ADDRESS: **8626 NE 24th Street
Clyde Hill, WA 98004-2427**

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

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

Amount (actual dollars)

\$ **N/A**

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
Agency name:

Purpose of payment (amount not required)

N/A

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE:
Customer name:

Purpose of payment (amount not required)

N/A

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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

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 <input type="checkbox"/> 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, excluding certain receptions as defined in WAC 390-20-020A; 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 <input type="checkbox"/> if continued on attached sheet | | | | |

Information Continued

F-1 Supplement

Name **Daniel J. Shih**

ENTITY NO. **3**

Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: **Monkey Ventures, LLC**

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

Member, 0.86%

ADDRESS: **900 Third Avenue Suite 502
 New York, NY 10022**

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Investment entity

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

Amount (actual dollars)

\$ **N/A**

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name:

Purpose of payment (amount not required)

N/A

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name:

Purpose of payment (amount not required)

N/A

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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

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) |
|---------------|------------------------------|-------------------|----------------------|------------------|
| | | | \$ | |

Information Continued

F-1 Supplement

Name **Daniel J. Shih**

ENTITY NO. **4**

Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: **BCIP Associates II-B**

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

Partner, 0.46%

ADDRESS: **200 Clarendon Street, Floor 41
 Boston, MA 02116-5016**

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Investment entity

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

Amount (actual dollars)

\$ **N/A**

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name:

Purpose of payment (amount not required)

N/A

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name:

Purpose of payment (amount not required)

N/A

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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

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) |
|---------------|------------------------------|-------------------|----------------------|------------------|
| | | | \$ | |

Information Continued

F-1 Supplement

Name
Daniel J. Shih

ENTITY NO. 5

Reporting For: Self Spouse
Registered Domestic Partner Dependent

LEGAL NAME: American Civil Liberties Union of Washington

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

Board member,
secretary-treasurer

ADDRESS: 901 Fifth Avenue, Suite 630
Seattle, WA 98164

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Non-profit defending civil liberties and civil rights

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

Amount (actual dollars)

\$ N/A

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
Agency name:

Purpose of payment (amount not required)

N/A

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
Customer name:

Purpose of payment (amount not required)

N/A

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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

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) |
|---------------|------------------------------|-------------------|----------------------|------------------|
| | | | \$ | |

Information Continued

F-1 Supplement

Name **Daniel J. Shih**

ENTITY NO. **6** Reporting For: Self Spouse
 Registered Domestic Partner Dependent
 LEGAL NAME: **API Chaya** POSITION OR PERCENT OF OWNERSHIP
Board member / treasurer
 TRADE OR OPERATING NAME:
 ADDRESS: **PO Box 14047**
Seattle, WA 98114
 BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:
**Non-profit serving survivors of domestic violence, sexual assault,
 and human trafficking**
 PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
N/A (no payments from State Legislature) \$ **N/A**
 PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name: Purpose of payment (amount not required)
See attachment
 PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name: Purpose of payment (amount not required)
N/A
 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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

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) |
|---------------|------------------------------|-------------------|----------------------|------------------|
| | | | \$ | |

ATTACHMENT TO PDC FORM F-1 SUPPLEMENT

NAME: Shih, Daniel J.

DISCLOSURE FOR ENTITY NO. 6 – API CHAYA

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE

| Agency name | Purpose of payment (amount not required) |
|---|---|
| State of Washington, Office of Crime Victims Advocacy | Advocacy and services for survivors of domestic violence, sexual assault, and other crimes and community organizing and education in marginalized communities |
| State of Washington, Department of Social and Health Services | Specialized services to victims of domestic violence from marginalized populations |
| City of Seattle, Domestic Violence Community Advocacy Program | Advocacy for domestic violence survivors |
| City of Seattle, Access to Advocacy Program | Phone-based access to advocacy for domestic violence survivors and coordination of bilingual/bicultural services. |
| King County, Community and Human Services | Supportive services, training and outreach to persons experiencing or at risk of domestic violence and dating violence |
| Japanese Consulate of Seattle | Assistance to survivors of domestic violence, sexual assault, and human trafficking, including Japanese nationals |

Information Continued

F-1 Supplement

Name **Daniel J. Shih**

ENTITY NO. **7** Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: **QLaw Association of Washington** POSITION OR PERCENT OF OWNERSHIP
Board member
 TRADE OR OPERATING NAME:
 ADDRESS: **PO Box 1991**
Seattle, WA 98111-1991

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: **Non-profit association of LGBT legal professionals**

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 \$ **N/A**

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name: Purpose of payment (amount not required)
N/A

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name: Purpose of payment (amount not required)
N/A

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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

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) |
|---------------|------------------------------|-------------------|----------------------|------------------|
| | | | \$ | |

Information Continued

F-1 Supplement

Name **Daniel J. Shih**

ENTITY NO. **8** Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: **Roanoke Reef Houseboat Owners Association** POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME: **Board member**

ADDRESS: **10 East Roanoke Street
Seattle, WA 98102**

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

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 \$ **N/A**

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name: Purpose of payment (amount not required)
N/A

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name: Purpose of payment (amount not required)
N/A

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 \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

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) |
|---------------|------------------------------|-------------------|----------------------|------------------|
| | | | \$ | |