PUBLIC DISCLOSURE COMMISSION
711 CAPITOL WAY RM 206
PO BOX 40908
OLYMPIA WA 98504-0908
(360) 753-1111

TOLL FREE 1-877-601-2828

F-1

PDC FORM

PERSONAL FINANCIAL AFFAIRS STATEMENT

PDC OFFICE USE

100446662

DOLLAR Refer to instruction manual for detailed assistance and examples. CODE **AMOUNT** Covers: \$1 to \$3,999 Incumbent elected and appointed officials -- by April 15. Deadlines: 2011 В \$4,000 to \$19,999 Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position. С \$20,000 to \$39,999 Received: D \$40,000 to \$99,999 03-24-2012

SEND REPORT TO PUBLIC DISCLOSURE COMMISSION			E	\$100,000 or more	03-24-2012
Last Name EADIE	First RICHARD	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.	
Mailing Address (Use PO Box or Work Address) 516 THIRD AVENUE, C-203				CLAIRE EADIE	SP
City	County	Zip + 4 981(
Filing Status (Check only one box.) X An elected or state appointed official filing annual report Final report as an elected official. Term expired:		year _		Office Held or Sought Office title: SUPERIOR COURT JUDGE County, city, district or agency of the office, name and number: KING CO SUPERIOR COURT Position number: 33 Term begins: ends: 01-01-2009 12-31-2012	
4	ist and amployer or other source of in	come (ne	neion eocia	l security legal judgment etc.) f	rom which you or a family

List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family INCOME member, including registered domestic partner, received \$2,000 or more during the period. (Report interest and dividends in Item 3 on reverse) Show Self (S) Spouse (SP/DP) Occupation or How Compensation Name and Address of Employer or Source of Compensation Amount: Was Earned (Use Code) Dependent (D) KING COUNTY SUPERIOR COURT SUPERIOR COURT JUDGE \mathbf{E} 516 3RD AVE. C-203 SEATTLE WA 98104-2381 SP WINDERMERE REAL ESTATE - EDMONDS REAL ESTATE AGENT B COMMISSIONS 210 5TH AVE. SOUTH **EDMONDS** 98 WA Check Here X 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 \$10,000 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 Name and Address of Purchaser Nature and Amount (Use Code) of Payment or Value Consideration Received (Use Code) Berthold E. Breitling King County 2534 N.W. 194th Ε Ε Pl. Shoreline, WA 98177 2520 N.W. 194th Pl. Shoreline 92177 Mortgage Amount - (Use Code) Security Given Property Purchased or Interest Acquired Creditor's Name/Address Payment Terms Original Current All Other Property Entirely or Partially Owned Chase Bank 1455 N. W. 188TH ST. Ε 1401 5TH AVE. 30 YRS. @ D. O. T. SHORELINE, KING COUNTY, WA
Check here I if continued on attached sheet 6. 75% SEATTLE 98101



DISCLOSURE COMMISSION

711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828 EMAIL: pdc@pdc.wa.gov PDC FORM

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SUPPLEMENT
(1/12)

100446662

SUPPLEMENT PAGE

CONTINUE PARTS B AND C ON NEXT PAGES

PERSONAL FINANCIAL AFFAIRS STATEMENT

03-24-2012

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

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

A OFFICE HELD,
BUSINESS
INTERESTS:

Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents

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

	vas given or performed for the compensation. fy real estate owned by the business entity if the qualifications referenced below are met.
ENTITY NO. 1	Reporting For: Self X Spouse
	Registered Domestic Partner Dependent
LEGAL NAME:	POSITION OR PERCENT OF OWNERSHIP
Eadie Family Trust	Trustee
TRADE OR OPERATING NAME: Eadie Family Trust	
ADDRESS: 1455 NW 188th St	
Shoreline	WA 98177
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION	N:
Ownership and management of real est	cate
Purpose of payments	Amount (actual dollars) \$
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNM Agency name:	MENT AGENCIES OF \$10,000 OR MORE: Purpose of payment (amount not required)
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTO Customer name:	DMERS OF \$10,000 OR MORE Purpose of payment (amount not required)
	DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and ess, assessor parcel number, or legal description and county for each parcel):
Check here ☐ if continued on attached sheet	