



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-39365** APN: 163-06-816-029

Name of Property Owner: KATSAM, LLC

Name of Applicant: Moneytree, Inc.

Name of Representative: Lionel Sawyer & Collins c/o Jennifer Roberts

To the best of your knowledge, does the Mayor or any member of the City Council or Planning Commission have any financial interest in this or any other property with the property owner, applicant, the property owner or applicant's general or limited partners, or an officer of their corporation or limited liability company?

☐ Yes

☒ No

If yes, please indicate the member of the City Council or Planning Commission who is involved and list the name(s) of the person or persons with whom the City Official holds an interest. Also list the Assessor's Parcel Number if the property in which the interest is held is different from the case parcel.

City Official: _____

Partner(s): _____

APN: _____

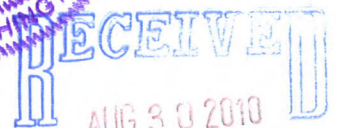
Signature of Property Owner: David E. Bassford

Print Name: David E. Bassford
Managing Member

Subscribed and sworn before me

This 27th day of July, 2010

King County
Washington State
Notary Public in and for said County and State



PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: Special Use Permit -- Auto Title Loan
 Project Address (Location) 9470 West Sahara Avenue
 Project Name Moneytree Proposed Use Auto Title Loan
 Assessor's Parcel #(s) 163-06-816-029 Ward # 2
 General Plan: existing Comm. proposed -- Zoning: existing C-1 proposed --
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres 0.64 Lots/Units 1 Density _____
 Additional Information _____

PROPERTY OWNER Katsam, LLC Contact Kari Harris
 Address 6720 Fort Dent Way, Suite 230 Phone: (206) 246-3500 Fax: (206) 835-2635
 City Seattle State WA Zip 98188
 E-mail Address Kari.Harris@Moneytreeinc.com

APPLICANT Moneytree, Inc. Contact Kari Harris
 Address 6720 Fort Dent Way, Suite 230 Phone: (206) 246-3500 Fax: (206) 835-2635
 City Seattle State WA Zip 98188
 E-mail Address Kari.Harris@Moneytreeinc.com

REPRESENTATIVE Lionel Sawyer & Collins Contact Jennifer Roberts
 Address 300 South Fourth Street #1700 Phone: (702) 383-8946 Fax: (702) 671-2490
 City Las Vegas State NV Zip 89101
 E-mail Address jroberts@lionelsawyer.com

Property Owner Signature* David E. Bassford

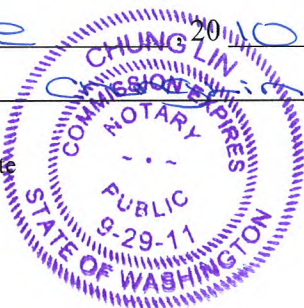
* An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps, and Parcel Maps.

Print Name David E. Bassford

Subscribed and sworn before me

This 10th day of June 2010

Notary Public in and for said County and State



FOR DEPARTMENT USE ONLY

Case #	<u>SUP-39365</u>
Meeting Date:	<u>10/21/10</u>
Total Fee:	<u>1,030.00</u>
Date Received:*	<u>8/30/10</u>
Received By:	<u>[Signature]</u>

*The application will not be deemed complete until the submitted materials have been reviewed by the Planning and Development Department for consistency with applicable sections of the Zoning Ordinance.

