KING COUNTY APPLICATION FORM FOR CITIZENS ELECTION OVERSIGHT COMMITTEE



(A resume may be submitted in addition to a completed application form)

PLEASE NOTE: Information provided on this form will be a public record subject to free and open examination by any person under the Washington State Public Records Act (RCW 42.56.250). However, while we will disclose the applicant's name, the applicant's address, phone number and email address will be redacted.

Thank you for your interest in serving on the King County Citizen's Election Oversight Committee. Individuals selected to serve on a King County board or commission will also be required to complete a King County Ethics Program Financial Disclosure Form within two weeks of being nominated to serve on a King County board or commission. Individuals appointed to serve on a board or commission that is overseen by an agency independent of King County government are exempt from the financial disclosure filing requirement.

Name:				
Stefan Sharkansky				
Preferred Contact Information:				
Address [mailing]	15600 NE 8 th St STE B-1 PMB 101			
City, State, Zip Code	Bellevue, WA 98008			
Home Phone				
Work Phone				
Cell Phone	206 484-6754			
Email Address	sharkansky@gmail.com			
Position you are applying for:				
Nominee of Republicar	n Party			
If you are applying for a position where you would be the representative of an organization (all positions except positions representing language minorities and registered voters), please provide a written statement by the entity designating you as their representative on the CEOC (this can also be provided as an attachment):				
King County Republican Party Chair Cynthia Cole will separately e-mail a written statement designating me as the party's nominee.				
King County Council District (Please type an "X" in the box to the right of your district) 1				
Please explain why you feel you are the most qualified candidate for this position.				
The King County Republican Party has selected me as its nominee to the CEOC.				

Have you served on the CEOC previously? If yes, please note the dates and the number of terms, and whether you have served in a leadership position:	
I have not previously served on the CEOC.	
Please share how you meet the qualifications required to be a CEOC Member as listed here:	
1. A working knowledge of local or state government elections operations and management, demography, technology and organizational management.	
2. A strong commitment to an accountable, transparent, well-managed and efficient elections operation in King County.	
3. A willingness to commit the time necessary to attend committee meetings and activities such as observing elections.	
4. A nominee or appointee to the committee shall not hold elective public office or be a candidate for election to public office, other than as a precinct committee officer. (Do you hold an elective office?)	
5. Good oral communication skills as well as interpersonal skills and ability to work well in a group situation.	

	1)	In the period after the mishandled 2004 General Election, I extensively researched the
		administration of that election through review of public records and communications with
		elections staff. I became familiar with state election laws and King County election operations. I
		uncovered multiple processing errors and lapses in procedures during the conduct of the 2004
		election that led to hundreds of votes either improperly accepted or improperly uncounted. I
		reported my findings on a blog and in other media, and shared them with County
		Councilmembers. I was told that my reports helped inform some of the many positive
		improvements that county elections administrators implemented after 2004. I have also attended
		several Canvassing Board meetings, and was given a staff-guided tour of the Renton mail ballot
		processing facility during post-election ballot processing one November.
	2)	I have a deep commitment to accountable, transparent, well-managed and efficient elections. I
		believe that is demonstrated by the fact that I undertook the time-consuming efforts described
		above on my own initiative out of public spirit and for no compensation.
	3)	I am willing to commit the time necessary to perform all of the duties expected of a CEOC
		member.
	4)	I am an elected precinct committee officer. I do not hold any other elective office, nor am I a
	,	candidate for any elective office.
	5)	I believe I have the requisite skills and abilities to work as a collegial and effective member of
	,	the CEOC, and have the confidence of the King County Republican Party.
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	Yes.	
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]	PERSC	ONAL INFORMATION (OPTIONAL)
		ng County Council and the King County Executive are committed to inclusiveness and outreach to
		2 County residents to ensure that King County boards and commissions are reflective of the

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community we serve. Providing information in the section below is <u>voluntary</u> but will assist in achieving this goal.

Race/	Ethn	icity
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Race/Ethnicity:	
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Gender:				
Sexual Orientation:				
Do you have a disability a the boxes that apply to you Yes No	ns defined by the Americans with Disabilities Act? (Please type an "X" in			
Generation Range: 30 or younger 31-4	1 42-52 53-63 64-74 75 or older			
Person to Notify in Case of Emergency (OPTIONAL)				
Name	Irene Song (wife)			
Home Phone				
Work Phone				
Cell Phone	206 265-1344			
Agreement and Signature				
By submitting this application, I affirm that the facts set forth in it are true and complete to the best of my knowledge.				
Name (typed or signature)	Stefan Sharkansky			
Date	June 7, 2019			

Please return completed form to:

(You can either mail your completed form to us; scan your completed form then email it to us as a PDF attachment; or after filling out the form and typing your name on the signature line, save the completed form to your hard drive and then attach the completed form to an email.)

Sahar Fathi Council Central Staff 516 Third Avenue, Suite 1200 Seattle, WA 98104

Direct Line: 206-263-0960

Email: Sahar.Fathi@kingcounty.gov

This material is available in alternate formats for persons with disabilities. Please contact (206) 296-1000, TTY Relay: 711, or (206) 296-1024