PUBLIC DISCLOSURE COMMISSION

711 CAPITOL WAY RM 206
PO BOX 40908
OLYMPIA WA 98504-0908
(360) 753-1111
Toll Free 1-877-601-2828

Treasurer's Annual Statement

T-1
(1/2026)

THIS SPACE FOR OFFICE USE

Name of Qualifying Jurisdiction:			Telephone Number ( )
Treasurer's Name:			Treasurer's E-Mail Address
Official Address:			Jurisdiction's E-Mail Address
City	County	Zip + 4	Fax Number ( )

Filer Deadlines For: County Finance Committee Members and Treasurers for Washington State and each County, Public Utility District, Port District, or Incorporated City or Town Whose Population Exceeds 1000 **– Annual Report must be filed between January 1 and April 15 of each calendar year.**

NOTICE: Filers are personally responsible for timely filing a complete and accurate T-1.

SEND ANNUAL STATEMENT TO PUBLIC DISCLOSURE COMMISSION

STATEMENT 1: No Investment with Current Treasurer's Financial Institution

I certify under penalty of perjury under laws of the state of Washington that during the period of January 1, 20___, through December 31, 20___, no public funds under my control were invested in any institution in which I held an office, directorship, partnership interest, or ownership interest.

Signature of Treasurer	Dated	Signature of Finance Committee Member (Counties Only)	Dated
Signature of Finance Committee Member (Counties Only)	Dated	Signature of Finance Committee Member (Counties Only)	Dated

STATEMENT 2: Investment with Current Treasurer's Financial Institution

I certify that during of the period of January 1, 20___, through December 31, 20___, public funds for which I am responsible were held in the listed financial institution(s) in which I held an office, directorship, partnership interest, or ownership interest:

Name & address of financial institution:
Aggregate sum of time and demand deposits on December 31, 20___: $
Highest balance between January 1, 20___, and December 31, 20___: $

Signature of Treasurer	Dated	Signature of Finance Committee Member (Counties Only)	Dated
Signature of Finance Committee Member (Counties Only)	Dated	Signature of Finance Committee Member (Counties Only)	Dated

STATEMENT 3: Treasurer for Reporting Period No Longer in Office

I certify under penalty of perjury under laws of the state of Washington that the treasurer who held office during the period of January 1, 20___, through December 31, 20___, is no longer employed by our jurisdiction.

I assumed the role of treasurer after the end of the above listed reporting period, on _____ ____, 20___, and had no control over public funds during the reporting period.

Signature of Treasurer	Dated	Signature of Finance Committee Member (Counties Only)	Dated
Signature of Finance Committee Member (Counties Only)	Dated	Signature of Finance Committee Member (Counties Only)	Dated

SEE INSTRUCTIONS ON NEXT PAGE

Reporting requirements are contained in and governed by RCW 29B.45.040

T-1 (1/2026)	**TREASURER'S ANNUAL STATEMENT**

Who Must File –

- Washington State Treasurer
- County Treasurer for each county
- County Finance Committee Members (if applicable to your county)
- Public Utility District Treasurers
- Port District Treasurers
- Treasurers of Incorporated Cities or Towns (whose population exceeds 1000)

When To File – Between January 1 and April 15 of each calendar year. The T-1 must be filed each year to certify the previous calendar year. It is advised to put this date on the annual calendar for your jurisdiction to ensure compliance.

Where To File – Send the **original to PDC** at the address on the reverse side. Keep a copy for the jurisdiction's records.

E-Mail Communication and Duty to Update: The Public Disclosure Commission will use the individual filer's e-mail address as the primary method of communication, and the jurisdiction's e-mail as a secondary method of communication. It is the filer's responsibility to update this contact information whenever it changes.