QUESTIONNAIRE FOR GUBERNATORIAL APPOINTMENTS REQUIRING SENATE CONFIRMATION

| Office Appointed To: Direc | ctor | | | | | in the second | |
|---|---|---------------------------|--|----------|---|---------------------------------------|--|
| Date of Appointment: Janu | ary 16, 2 | 013 | | 1- | | | |
| For Term Ending: | | | | | | · | |
| New Appointme | ent R | eappointm | ent | App | ointment for | Unexpired Term | |
| | | | | | | · · · · · · · · · · · · · · · · · · · | |
| The information you possible in considering as Please type or | ction on you | r confirm | ation. | Please c | omplete ea | асп ыапк, іг арріісаые. | |
| | | | | | - | nte San Sell and visit | |
| | PERSON | IAL INFOR | MATIC | N – SECT | ION 1 | | |
| Name Marcie Frost | | | | | | | |
| Business Name Dept. of Retirement Sy | ystems PO | ness Address Address 4838 | ess 30 | | | | |
| City Olympia | State | VA. | Zip | 9850 |)4 | Phone (360) 664-7312 | |
| Residence Address | rect no | U | | | City Olu | mpia | |
| | State (1) 14 | Zip 985 | 02 | Phone S | 28-9657 | Years at current residence (months | |
| If less than two years at curre | nt address, ple | ase list pr | evious | address | City Oly | mpia | |
| County Thuston | State WA Zip 98501 | | | Phone | 5-3×3 | Years at previous residenc | |
| List all your current residence | es outside of W | ashington. | | | | | |
| City | State | | Percentage of time spent outside of Washington | | | | |
| 1 12 3150 | TOWN | | Carly and the court . East to really | | | | |
| | | | | | | 200 | |
| Date of Birth 7/23/196 | Ч | Place | of Birth | mor | ton, Wa | ashington | |
| Have you ever used or been Yes If "yes", plea | | | | | | | |
| Are you a citizen of the United | | | w long ashingt | on? 39 | years . | nuous resident of | |
| Are you registered to vote in Washington State? V Yes No | Party Affiliat (Reply only if a precondition of | statutory |) | | County of registration: Truston When did you last vote: | | |

| Have you ever been | convicted o | of or found | d to have | committe | d a crime | or offense? (| Do not inc | lude traffic offenses | |
|---|---|---------------------------------------|--|------------------|-----------|-------------------|-------------------------|---------------------------------------|--|
| for which the fine wa | as less than | \$200.) | | | | | | | |
| No No | | · · · · · · · · · · · · · · · · · · · | | - | | | | | |
| Date | Place | lace | | Nature | | | Disposition | on | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | EDUC | ATION – S | ECTION | 1 2 | | | |
| High-School High School | | | Year Graduated 1982 | | | | 2 | | |
| List all postsecondar | ry education | al institut | ions atte | nded. | | | | | |
| Name/Location | | | Date | s of Attend | lance | Certifica | ificates, Degrees, etc. | | |
| Evergreen Sta | ke Colle | ae, | 200 | 09- | | | | | |
| | | | | | | | | - mirror | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | · | | | | | | |
| | - 10-(i-g) I | | | HISTORY | | Th | - al c- | Lar | |
| Are you or have you ever been a member of the Armed Forces of the United States? Ves No | | | | | | | | x 9 1 114 | |
| Dates of Service | 17704 | Branch o | of Service | ce Date and | | | ype of Dis | scharge | |
| | | | | | 181 | | | | |
| | | | EMPLO | YMENT - | SECTIO | N 4 | | | |
| Current Employmen | t: | Tree | | | | | | | |
| Name/Location Natur DRS/Tumwater Pers | | | re of Business Sign Administration Ropf. Dive | | | Position Diver | Hov | From To | |
| Previous employmen | | | | | | 1 | | | |
| Name/Location DRS/TUMIDAD | tev | fere | | ministra | tion | Deputy Die | redov | From/To 3/09 - 1/13 | |
| Have you ever been or local governmenta | employed b | gency? | a positio | on or office | with any | / federal, foreig | ın, Washir | ngton or other state, | |
| Position Name | | | Name o | of Entity/Agency | | | From/To | | |
| Executive Management Des | | | Des | | | | 11/2000-5/2008 | | |
| Human Resou | Executive Management Des Human Desaurces Lés | | | | | | 10/1985-11/2000 | | |
| | | | | | | | | | |

| | | | ' | | or commoditi | | | | |
|---|----------------------------|-------------------------|--------------------------|------------------------------------|----------------|---|---|--|--|
| Yes If "yes", please ex | plain. | e de | | | | | | | |
| Have you ever been refused o | r granted a f | idelity, | surety, o | or other bone | 17 | | 1 | | |
| ☐ Yes If "refused", please No | e explain. | | | ¥: | | | | | |
| Have you been a registered to any time during the past five y ☐ ✗es | years? compensation? ☐ Yes | | | at any time o | | | mployed a registered lobbyist during the past five years? | | |
| V No Group(s) represented: | | ☐ No | | | I No | | | | |
| If currently a registered lob | | | | | 10010 | | for the past two years. | | |
| | | | | | ICE - SECTION | | | | |
| List any community, civic, trac | le, or profes | sional | | organizations in which you have be | | | | | |
| Organization/Project | | L . | City/State | | | From/To | | | |
| National Assoc of State Delivement Administration (NASM) | | | based in Beten Rouse, LA | | | 3/2009 - present 3/2009 - present 3/2009 - present 3/2009 - present 1998 - 2003 | | | |
| Notional Conference on Teacher Refirement | | | | | | 3/2009 - Prescrit | | | |
| National Conference in Public Employees | | | | | | 310am-gresent | | | |
| Mational Institute on Letirement scienty | | | | | | 3/2009- PrexMT | | | |
| Cal Ripken Baseball (youth) | | | Olympia, WA | | | 1998-2003 | | | |
| Have you ever been elected of Yes If "yes", please if No | or appointed | to any | / public o | ffice, board | or commissior | in W | ashington State? | | |
| Title/Position | Office/Board | ., | | | ction/Appointr | nent | Length of Term/Service | | |
| Board Member | cosh. State | ale Investment Board | | 1/16/2013 | | | Tempof appt as | | |
| | | | | | | | | | |
| | | | | | | | | | |
| If your prior appointment was | to a board | or com | mission, | how often d | id it have sch | edulec | I meetings? | | |
| Did you attend all of the regu | larly schedu | led me | etings? | | | | | | |

| I've would at Dra Dunny that time the agency's open on meeting custome | s in various mi l. I developed though health a needs. I have | w or united for to his | essuip roles for 10 years. Statishedous, improved mapon to be more focused pursions but see my role as be |
|---|---|--------------------------------|--|
| of the office or position t | o which you have been | | be able to attend fully to the duties |
| ☐ Yes If "yes V No | , please explain | | |
| | REF | ERENCES - SECTION 7 | |
| Please list three persons | (excluding relatives) v | vho have known you well withi | in the past five years. |
| Name | Relationship | Address | Phone Number |
| Courtney Dutra | Friend | | B10/41-1005 |
| mark Wasson | Friend | | 360) 740-3344 360/664-7304 |
| Dave Nelsen | Professional | 5 | 30 V664-1304 |
| | | | |
| I certify under penalty of complete, and correct to | perjury under the laws | of the State of Washington, th | nat the above information is true, |
| Signature | 00 | - | Date 1/31/13 |

PLEASE RETURN A HARD COPY OF THIS FORM, ALONG WITH (IF REQUIRED) ALL CURRENT PUBLIC DISCLOSURE REPORTS FILED PURSUANT TO RCW 42.17.

Br. P. D. L.

RETURN TO:

OFFICE OF THE GOVERNOR PO BOX 40002, OLYMPIA, WA 98504-0002