

**CITY OF OKANOGAN
COUNCIL AGENDA – SPECIAL MEETING
September 23, 2026 5:30 P.M.
Council Chambers, also available via Zoom**

Meeting ID: 830 0208 9303

One tap mobile: 1-253-215-8782

1. **CALL TO ORDER and PLEDGE OF ALLEGIANCE**
2. **APPROVAL OF AGENDA**
3. **PRESENT APPLICANTS FOR COUNCILMEMBER POSITIONS 2 AND 3**
4. **EXECUTIVE SESSION PER RCW 42.30.110 IF NEEDED**
5. **COUNCILMEMBER 2 APPOINTMENT/OATH OF OFFICE**
6. **EXECUTIVE SESSION PER RCW 42.30.110 IF NEEDED**
7. **COUNCILMEMBER 3 APPOINTMENT/OATH OF OFFICE**
8. **COUNCILMEMBER COMMENTS**
9. **MAYOR COMMENTS**
10. **ADJOURNMENT**

CITY OF OKANOGAN

Mayor Wayne L. Turner



APPLICATION FOR CITY COUNCIL MEMBER POSITION # 4

Thank you for your interest in serving the City of Okanogan community as a member of the Okanogan City Council. To be considered, applications must be completed, signed, and received at the City Clerk's office, 120 3rd Ave. North. Applications may be hand-delivered, mailed to PO Box 752, Okanogan, WA 98840, or emailed to cityclerk@okanogancity.com

Name: Gadd Hal Steven
(Last) (Middle) (First)

Complete Home Mailing Address: 1125 1st Avenue South, Okanogan, WA 98840

Home Phone: (509) 322-8495 Cell: (509) 322-8495

Business Phone: (509) 422-1174

E-mail: stevengadd@gmail.com

Occupation: (if retired, please indicate former occupation) State Auditor

Business Address: 233 1st Avenue South, Okanogan, WA 98840

Educational Background: Masters of Business Administration, University of Washington

1. Registered voter in the City of Okanogan? ☒ Yes ☐ No

2. Have you continuously resided within the city limits of the City of Okanogan for a year or more? (State law requires a councilmember to be a resident of Okanogan for at least a year prior to appointment, and to be a registered voter at the time of application.) ☒ Yes ☐ No

3. Do you or your spouse or any immediate family member (spouse, children, siblings, parents) have a financial interest in, or are you an employee or officer of any business or agency which does business with the City of Okanogan? ☐ YES ☒ NO If yes, please explain: _____

4. Is any member of your immediate family currently employed, either full time or part time, by the City of Okanogan? ☐ YES ☒ NO

If yes, please explain: _____

5. Would your appointment create a conflict of interest or an appearance of a conflict of interest? ☐ YES ☒ NO

If yes, please explain: _____

6. Please list your employment for the past ten years (or attach resume):

NAME OF EMPLOYER	POSITION HELD	DATES OF EMPLOYMENT
WA State Auditor's Office	Assistant State Auditor	January 12 to Present
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Please list the professional affiliations, clubs, social, or fraternal organizations to which you belong or hold office: _____

American Legion, Eagles

8. Please list your special skills and/or interests: Business, Finance, Community Development

9. Please list your volunteer experience, and include any volunteer or paid positions held on any governmental board, committee or commission:

Okanogan City Council	FROM: 2009	TO: 2012
_____	FROM: _____	TO: _____
_____	FROM: _____	TO: _____
_____	FROM: _____	TO: _____

10. Why are you interested in serving in this position as an Okanogan City Councilmember?

I enjoyed my time on the Okanogan City Council, and felt I brought value and experience to the Council. I was required by my employer to resign from my elected term. Since that time, my employer has determined they had no right to require me to resign. I have been waiting for a council position to open up.

11. Appointment to the City Council will require your attendance at regularly scheduled meetings the first and third Tuesday of each month at 7pm and occasionally special meetings. Are you able to commit your time and energy to participate fully as a member of the Okanogan City Council. ☒ YES ☐ NO

12. References: Please list name, address and phone number:

1. Wayne Turner
2. Denise Varner
3. Lisa Bauer

Once submitted, applications and related materials become a public record subject to public disclosure, and may appear in a Council agenda packet. You may be asked to attend a meeting and provide a short presentation to the Council.

I certify under penalty of perjury under the laws of the State of Washington, that the foregoing is true and correct.

Steven H. Gadd

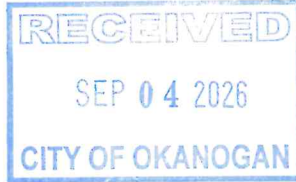
SIGNATURE

9/3/2026

DATE

CITY OF OKANOGAN

Mayor Wayne L. Turner



APPLICATION FOR CITY COUNCIL MEMBER POSITION # 3

Thank you for your interest in serving the City of Okanogan community as a member of the Okanogan City Council. To be considered, applications must be completed, signed, and received at the City Clerk's office, 120 3rd Ave. North by **Wednesday, September 9, 2026**. Applications may be hand-delivered, mailed to PO Box 752, Okanogan, WA 98840, or emailed to cityclerk@okanogancity.com

Name: YUSI G Brent
(Last) (Middle) (First)

Complete Home Mailing Address: PO Box 1670 Okanogan

Home Phone: 509 429 2685 Cell: same

Business Phone: _____

E-mail: yusiconsta@gmail.com

Occupation: (if retired, please indicate former occupation) General Contractor

Business Address: 215 4th Ave South Okanogan

Educational Background: Degree in Applied Science

1. Registered voter in the City of Okanogan? ☒ Yes ☐ No

2. Have you continuously resided within the city limits of the City of Okanogan for a year or more? (State law requires a councilmember to be a resident of Okanogan for at least a year prior to appointment, and to be a registered voter at the time of application.) ☒ Yes ☐ No

3. Do you or your spouse or any immediate family member (spouse, children, siblings, parents) have a financial interest in, or are you an employee or officer of any business or agency which does business with the City of Okanogan? ☐ YES ☒ NO If yes, please explain: _____

4. Is any member of your immediate family currently employed, either full time or part time, by the City of Okanogan? ☐ YES ☒ NO

If yes, please explain: _____

5. Would your appointment create a conflict of interest or an appearance of a conflict of interest? ☐ YES ☒ NO

If yes, please explain: _____

6. Please list your employment for the past ten years (or attach resume):

NAME OF EMPLOYER	POSITION HELD	DATES OF EMPLOYMENT
Yusi Construction Inc	Owner	3/85 - 3/2026

7. Please list the professional affiliations, clubs, social, or fraternal organizations to which you belong or hold office: Okanogan Kiwanis Club, Okanogan Eagles,

Okanogan Chamber, Omak Elks, Omak First Baptist Church

8. Please list your special skills and/or interests: I have run a construction company for 40 years

9. Please list your volunteer experience, and include any volunteer or paid positions held on any governmental board, committee or commission:

Mid Valley Hospital (Board)	FROM: _____	TO: <u>6 years</u>
Okanogan City planning Commission	FROM: _____	TO: <u>In the 1990s</u>
	FROM: _____	TO: _____
	FROM: _____	TO: _____

10. Why are you interested in serving in this position as an Okanogan City Councilmember?

I was raised in Okanogan. I have pride in are community and would like to offer my time to help with the business side of running Okanogan.

11. Appointment to the City Council will require your attendance at regularly scheduled meetings the first and third Tuesday of each month at 7pm and occasionally special meetings. Are you able to commit your time and energy to participate fully as a member of the Okanogan City Council. ☒ YES ☐ NO

12. References: Please list name, address and phone number:

1. Scott Furman Omak 509 322 1869
2. Greg Hamilton Okanogan 509 322 2713
3. Sandy Simonson Okanogan 509 429 9514

Once submitted, applications and related materials become a public record subject to public disclosure, and may appear in a Council agenda packet. You may be asked to attend a meeting and provide a short presentation to the Council.

I certify under penalty of perjury under the laws of the State of Washington, that the foregoing is true and correct.

Brent G. Guss
SIGNATURE

9/4/2026
DATE

CITY OF OKANOGAN

Mayor Wayne L. Turner



APPLICATION FOR CITY COUNCIL MEMBER

Thank you for your interest in serving the City of Okanogan community as a member of the Okanogan City Council. To be considered, applications must be completed, signed, and received at the City Clerk's office, 120 3rd Ave. North **by Wednesday, September 9, 2026**. Applications may be hand-delivered, mailed to PO Box 752, Okanogan, WA 98840, or emailed to cityclerk@okanogancity.com

Name: Fontas, Andrew Ryan

(Last)

(Middle)

(First)

Complete Home Mailing Address: 706 7th Ave S, Okanogan, WA 98840

Home Phone: _____

Cell: 603-689-3150

Business Phone: _____

E-mail: fontasr@gmail.com

Occupation: (if retired, please indicate former occupation) Records Clerk

Business Address: 123 5th Ave N, Okanogan, WA

Educational Background: Bachelors Business Administration

1. Registered voter in the City of Okanogan?

☒ Yes ☐ No

2. Have you continuously resided within the city limits of the City of Okanogan for a year or more? (State law requires a councilmember to be a resident of Okanogan for at least a year prior to appointment, and to be a registered voter at the time of application.)

☒ Yes ☐ No

3. Do you or your spouse or any immediate family member (spouse, children, siblings, parents) have a financial interest in, or are you an employee or officer of any business or agency which does business with the City of Okanogan? ☒ YES ☐ NO If yes, please explain: Employee of Okanogan County Sheriff

4. Is any member of your immediate family currently employed, either full time or part time, by the City of Okanogan? ☐ YES ☒ NO

If yes, please explain: _____

5. Would your appointment create a conflict of interest or an appearance of a conflict of interest? ☐ YES ☒ NO

If yes, please explain: _____

6. Please list your employment for the past ten years (or attach resume):

NAME OF EMPLOYER	POSITION HELD	DATES OF EMPLOYMENT
Okanogan County Sheriff	Records Clerk	02/2026-Present
Amazon Inc	Risk Specialist	03/2016-10/2025
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Please list the professional affiliations, clubs, social, or fraternal organizations to which you belong or hold office: _____

8. Please list your special skills and/or interests: _____

9. Please list your volunteer experience, and include any volunteer or paid positions held on any governmental board, committee or commission:

OCCAC	FROM: 10/2025	TO: 02/2026
_____	FROM: _____	TO: _____
_____	FROM: _____	TO: _____
_____	FROM: _____	TO: _____

10. Why are you interested in serving in this position as an Okanogan City Councilmember?

I want to contribute more to the town and community I live in. Since volunteering and working locally have had a renewed interest in not just participating, but providing my perspective and experience to both support and improve my community.

11. Appointment to the City Council will require your attendance at regularly scheduled meetings the first and third Tuesday of each month at 7pm and occasionally special meetings. Are you able to commit your time and energy to participate fully as a member of the Okanogan City Council. ☒ YES ☐ NO

12. References: Please list name, address and phone number:

1. Gaelen Ritter, 706 7th Ave S, Okanogan WA 98840 910-603-9034
2. Nam Huy-Leduc 2203 S Hemburger St, Philadelphia 19145 714-415-8100
3. Josh Richards 774 2nd Ave N, Okanogan, WA 98840 509-846-4074

Once submitted, applications and related materials become a public record subject to public disclosure, and may appear in a Council agenda packet. You may be asked to attend a meeting and provide a short presentation to the Council.

I certify under penalty of perjury under the laws of the State of Washington, that the foregoing is true and correct.

Ryan Fontas

SIGNATURE

09/14/2026

DATE