Select Committee on Ethics







Select Committee on Ethics







Select Committee on Ethics







Select Committee on Ethics

Financial Bisclosure





SELECT	COMMITTEE ON ETHICS Late Notices
certified mai	policy is to mail late notices il, return receipt requested the late notice is also cc:d to the
supervising Civil and criminal	Senator sanctions may be imposed for individuals
wno knowin	ngly and willfully fail to file this report

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Select Committee on Ethics





ι	JNITED STATES SENA		CIAL DISCLOSU		Calendar Year (2011) Current Year (2012)
Amendment		AND ILK		K10	
Filer	Joe		Calendar Year Covered by Re 2011		nmittee on Ethic
SH 220 Hart Washington, DC 20510	202-224	-2981	Termination Report Termination Date (mm/dd/yy)	Prior Office / Agency in Whi	ch Employed
AFTER READING THE I	NSTRUCTIONS - ANSWER		HESE QUESTIONS	AND ATTACH THE RE	ELEVANT PART
Did any individual or organization make a do paying you for a speech, appearance, or arti- if Yes, Complete and Attach PART I.	nation to charity in lieu of	Di ne ss	d you, your spouse, or dep imbursements for travel in 50 from one source)? Yes. Complete and Attach	enderit child receive any reports the reporting period (i.e., worth i	able travel or
Did you or your spouse have earned income investment income of more than \$200 from a reporting period? If Yes, Complete and Attach PART II.	iny reportable source in the	(m	d you, your spouse, or dep one than \$10,000) during I Yes, Complete and Attach	endent child have any reportabl he reporting period? PART VII.	e liability
Did you, your spouse, or dependent child hol more than \$1,000 at the end of the period, or investment income of more than \$200 in the If Yes, Complete & Attach PART IIIA and/or I	receive unearned or reporting period?	l cu	d you hold any reportable rrent calendar year? Yes, Complete and Attach	ossitions on or before the date of PART VIII.	f filing in the
Did you, your spouse, or dependent child pur reportable asset worth more than \$1,000 in ti If Yes, Complete and Attach PART IV.	rchase, sell, or exchange any he reporting period?	l er	you have any reportable sity? Yes, Complete and Attach	agreement or arrangement with PART IX.	an outside
Did you, your spouse, or dependent child rec reporting period (i.e., aggregating more than exempt?) If Yes, Complete and Attach PART V.		S5	this is your FIRST Report. 0000 from a single source Yes, Complete and Attach	Did you receive compensation on the two prior years? PART X.	of more than
	on must be answered and t				
File this report and any amendment Senate, Washington, DC 20510, \$3				Room 232, Hart Senate	Office Building, U.S.
This Financial Disclosure Statement is re by the Office of the Secretary of the Sen on Ethics. Any individual who knowingly criminal sanctions. (See 5 U.S.C. app. 4	equired by the Ethics in Governme ate to any requesting person upon and willfully falsifies, or who know	nt Act of 1978, written applic	as amended. The state	d by the Select Committee may be subject to civil and	FOR OFFICIAL USE ONLY Do Not Write Below this Lin
Certification I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and correct to the best of my knowledge and belief.	Joe File			5/16/12]
It is the Opinion of the reviewer that the statements made in this form are in compliance with Title I of the Ethics in Government Act.	For Official Use Only - Do Not Signature of Reviewing		Line	Date (Month, Day, Year)	1



act Name	First Name and Middle Initial	Commencement of Candidacy
	_	10/15/11
Filer	Joe	10/10/11
iome Mailing Address (Number, Street, City, State, and ZIP.)	Home Telephone Number (Indude Area Code)	
1234 2 nd and C Sreet	202-555-555	
Washington, DC 20510	202-333-3333	
Mice Mailing Address (Number, Street, City, State, and 2IP.)	Office Telephone Number (Include Area Code)	
235 2nd and C Speet		
	202-555-5556	
Washington, DC 20510	202 000 0000	CA - 100 -
	a public financial disclosure report with the	also lile triis
confidential report.		
Where to File: File this report with the S	totant Committee on Ethion Decision	County Westinger DO
	select Committee on Ethics, Ro	3. Senate, Washington, DC
20510.		
	G. W.	
When to File: Within 30 days after beco	ming a candidate to	Nember of the United States Senate, or
When to File: Within 30 days after beco by May 15 of that calendar year, which en	ming a candidate to R5	Nember of the United States Senate, or or before May 15 of each succeeding
by May 15 of that calendar year, which ever	ming a candidate for ERS	in or before May 15 of each succeeding
When to File: Within 30 days after beco by May 15 of that calendar year, which ever year an individual continues to be a cand required to file a Candidate Report.	ming a candidate (CERS) wer is later, but CERS idate. A co	Member of the United States Senate, or in or before May 15 of each succeeding in in the United States Congress is not
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Reporting Ind	DE FILI	ER	PART I. P	PAYMENTS 1	O PAY CH	ARITABLE ORGANIZATIONS IN L	IEU OF	HONORARI	A 1
during th	e reporting	period. Identify	the activity (spe	ech, article, o	rappearance	e each source to a charitable organization, which generated the payment. For five payments must be reported in Part \	urther inf	ormation, see	
Date of	Payment	N	ame of Source	,		Address (City, State)		ch, Article, spearance	Amount
	326/1X	Association of Amen	cen Associations		Wash, DC	EXAMPLE	Speech	EXAMPLE	\$1,000
Example	7/23/1X	XYZ Magazine			NY, NY	EXAMPLE	Article	EXAMPLE	\$500
1 6/10	0/11	Let's Go	Knicks, I	nc.	Chicag	o, Illinois	Sp	eech	\$2000
2									
3									
4									
5									
6									
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11			,						
12				RFI	MEN	IBER			
13				- ' ' - '	VII_IV				
14					,	,			
	A separate,	confidential report	which names the	charitable organ	ization receivi	ng such payments must be filed directly with	the Selec	t Committee on	Ethics.
						•			

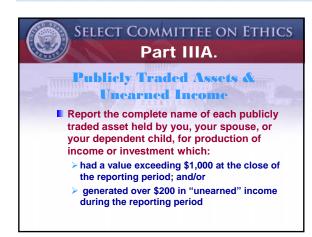
Last Name		First Name and Middle Initial	Telephone Number (Includ	s Area Code)	
FILER		JOE	202-224-29	981	
		Calendar Year Covered by An	nual Report Office / Agency in which Er	rployed (or formerly employed)	
X	ANNUAL FILER	2011	US SENATE	ETHICS COMMIT	TEE
	TERMINATION FILER	Dates Covered by Termination	Report: Office / Agency in which Fo	rmarly Employed Tem	ination Date (mm/dd/yy):
eport, please refe Disclosure Report Ethics. Where to File: Fi Room 220, Hart S	you are a reporting individual for purport to the instruction for the Sense for the the instruction of the Sense Select Corne contact the U.S. Sense Select Corne is this report with the Select Cornelities enote Office Building, U.S. Sense, Was a note: This is call the Fling location for	c Pinancial militae or Contents of Report unascertainable, the tre runns and address in the runns and address (organization, and the which correspond to a White Invancial disact Phase sign your reports) and that no comes	Report. Ex List the date of the payment (or, if take of the scriptly gring gas to the payment, date of the scriptly gring gas to the payment, the script, state of the souther of the symprest, the script, state) of the excipted the supplies of the supplies are amount of the payment. Include all payments be resporting period of the sensual or terminative of the supplies and contributed to the supplies and oxyments were made to charinable organization or cartifying that your report is complete and oxyments were made to charinable organization.	as amended.	he imposition of a civil and I at seq. and 18 U.S.C. 1001 If he reviewed by the ing public reports within 60 will be kept confidential by the
Date	Source of Payment	,	Recipient Charitable Organi		Amount
6/10/10	Lets Go Knicks,	Chicago, IL	American Red Cross, V	Vashington, DC	\$2,000
			the report should te Ethics Commit		
CERTIFY that the his form are true, sest of my knowle	Certification statements I have made on complete and correct to the dge and belief. No financial form any charitable	To	e Filer		6/2012

JOE FILER PA	RT II. EARNED AND NON-INVES	TMENT INCOME	2
Report the source, (name and address), type, and amount for your spouse, report the source (name and address) an enount needs to be specified for your spouse. (See p. 3, 6, 13.5. Government for you or your spouse. (See p. 3, 6, and dividuals not covered by the Honoraria Ban: or you and for your spouse, report honoraria income reco- speech, appearance or article) generating such honoraria properties of the properties	nd type of earned income which aggregate \$1,000 contents OF REPORTS Part B of Instruction and the second sec	amount, give the date of, and de-	period. No apployment by t
Name of Income Source	Address (City, State)	Type of Income	Amount
JP Computers	Wash, DC Example	Salary Example	\$15,000
MCI (Spouse)	Arlington, VA Example	Salary Example	Over \$1,000
DEWEY CHEATEM REELECTION CMTE	NEW YORK, NY	SALARY	\$18,000
I BELIEVE SO, INC. (SPOUSE)	JOE FILER	SALARY	OVER \$1,0
			/
15 "O \$4 000	"in indicated for the ABA	OUNT places	
	"is indicated for the AM		
De sure to ir	idicate that it is from you	ıı spouse	

Reporting Individual's Name JOE FILER	P	AR	TII	IA	. 1	PU	BL	.IC	LY	TF	RAI	DE	D.	AS	SE	TS	S A	NE) U	NE	ARNI	Đ	IN	CC	M	E S	80	UR	CI	S			3
BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources Report the complete name of each publicly	I		A	the f No	clos ne, c	ion e of s er les the f	of epo	Ass rting in \$	perie					ы.		_	ine	dude	is in	01)" i:	ype and Checked neceived	A L	mo	ir en	of I	nee bene	dec	in B	indi	vidu	ıt.	iten	n. This
traded asset held by you, your spouse, or your dependent child. (See p.3.	L	_	_	_	_	_	_	_	_	_	_	_	┖	_		Тур	e o	f In	con	ne		L	_	_	_	Алп	ou	nt o	đ In	cor	ne	_	
CONTENTS OF REPORTS Part B of instructions) by production of income or investiment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in 'unearnood' (3) generated over \$200 in 'unearnood' include on this PART III IA complete disentification of each public bond, mutual fund, publicly traded parinership interest, excepted versioners funds, bank accounts, excepted and qualified blind accounts, excepted and qualified blind proteins of the public bond or proteins of the public bond or proteins of the public bond.	None (or lass than \$1.001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 -\$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 -\$50,000,000	Over \$50,000,000	None	Dividends	Bark	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualfed Bind Trust	Other (Specify Type)	None (or less than \$201)	\$201 -\$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actus Amou Requir if "Othe Specifi
S. IRM Com (seed)	٠	۰	۲	×	۲	╁	H	┢	Н	Н	Н	Н	H	×	Н	┢	۲	┢	۲	Н	Example	Н	×	⊢	H	⊢	Н	┢	H	┢	Н	Н	Earn
Example: DC, or J (S) Keystone Fund	۰	۰	t	۳	х	Н	H	Н	Н	Н	Н	Н	H	-	Н	Н	H	х	H	Н	Example	х	Ë	Н	H	Н	H	Н	H	Н	Н	Н	Eastp
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Select Committee on Ethics

Financial Disclosure







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Select Committee on Ethics

Financial Disclosure

SELECT COMMITTEE ON ETHICS
Part IIIA.

PERSONAL SAVINGS ACCOUNTS

- Report the complete name of the financial institution where personal accounts are held
 - (This would include personal savings, checking, money market, certificates of deposit, and any other accounts at any institution)
- AGGREGATE MORE THAN \$5,000 at the end of the reporting period or which
- GENERATED MORE THAN \$200 in unearned income during the reporting period.

SELECT COMMITTEE ON ETHICS Part IIIA.

EXCEPTED INVESTMENT FUND

- A mutual fund, common trust fund of a bank, pension or deferred compensation plan, or any other investment fund which is:
 - Widely held (i.e. has more than 100 participants or investors); and
 - Publicly traded (or available) or widelydiversified; and
 - Held under circumstances where you don't have control over the financial interests held by the fund.

SELECT COMMITTEE ON ETHICS Part IIIA.

INVESTMENT CLUBS OR OTHER

HOLDING ARRANGEMENTS

- Identify the investment club and also any underlying investment asset or property held by the club where
 - (i) you (your spouse or dependent child's) interest in the underlying asset exceeds \$1,000 in value or
 - (ii) where the underlying asset generated more than \$200 in income for you (your spouse or dependent child)
 - (iii) if the investment club or holding itself meets the definition of an excepted investment fund, the information regarding the underlying assets are not reportable

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Select Committee on Ethics

Financial Disclosure

SELECT COMMITTEE ON ETHICS Part IIIA. RETIREMENT PLANS I Identify each asset held by a self-directed retirement plan. A self-directed retirement plan is one which does not meet the definition of an excepted investment fund.

- Widely held (i.e. has more than 100 participants or investors); and
- Publicly traded (or available) or widelydiversified; and
- Held under circumstances where you don't have control over the financial interests held by the fund.

SELECT COMMITTEE ON ETHICS Part IIIA. EXCEPTED TRUST An excepted trust is one which: Was not created by you, your spouse, or your dependent child; and Has holdings or sources of income of which you, your spouse, and any dependent child have no knowledge.

SELECT COMMITTEE ON ETHICS Part IIIA.
QUALIFIED BLIND TRUST
A qualified blind trust is a trust which has been certified by the Senate Select Committee on Ethics, in accordance with Senate Rule 34.
By the Select Committee on Ethics

Select Committee on Ethics

Financial Disclosure

Columnation of SDIG in *Vessel variety** 1	Reporting Individual's Name JOE FILER	P/	\R1	T II	IA.	. F	PU	BL	ICI	LY	TR	AI	DE	D	AS	SE	TS	A	ND	UI	NE	ARNI	Đ	IN	CC	М	E S	80	UR	CE	S		Page	Number 3
Note dispendent chief, Gene 2.8.1 Section 1.5	Identity of Publicly Traded Assets And Unearned Income Sources Report the complete name of each publicly			At	the f No	close ne, o	ion of r	of a	Ass ting in \$1	perio ,001					нт		_	inc	ludes	inco	t)" is	Checker	A L	mo	unt	of I	nee bene	ded oft o	in Bl	indiv	ridus	L	tem.	This
MODIAN (C. (NYSE)	CONTENTS OF REPORTS Part B of Instructions for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "uneamed" income during the reporting period. Include on this PAT III.A a complete identification of each public bond, mutual accounts, excepted investment funds, basis accounts, excepted and qualified blind tusts, and publicly tusted assess of a	None (or less than \$1,001)		3,001 -		\$100,001 - \$250,000	\$250,001 - \$500,000	\$600,001 -\$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000				None	Dividends		355					(Specify	950			8	-\$15,000	\$50,000	-\$100,000	-\$1,000,000	\$1,000,000***	000,001 - \$5,000,000	\$6,000,000	Actus Amou Requir "Othe Specifi
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SELECT COMMITTEE ON ETHICS Exemption Test The reporting individual is not required to report assets, transactions, and/or liabilities which the reporting individual certifies: > (1) represents the spouse's or dependent child's sole financial interest or responsibility and which the reporting individual has no knowledge of; > (2) which are not in any way, past or present, derived from the income, assets, or activities of the reporting individual; and

(3) which the reporting individual neither derives, nor expects to derive, any financial or economic

benefit.

	JOE FILER	P.	AR	ΤII	iΒ.					sLIC	CL,	/ T	R#	4DF	ĒD	AS	SE	TS	AN	ИD	UN	NEARN					Æ:	soi	UR	CE	s	٦	Page	4
Asso	BLOCK A Identity of Non-Publicly Traded ets and Unearned Income Sources	Ī		At	the :	aluat close	tion se of r	repor	Assi	perio	od.			ĺ	117	None	a (or	less	than	1 \$20	017 is	Type and	d Ar	o othe	unt	of I	s ne	eded	in Bi	lock	C for	that	item.	. This
descri	rt the name, address (city, state and iption) of each interest held by you,								colum				1	H	_	-	Турс					receives.	Ë	200 uni	10 2				nt o				_	_
p.3, C Instrui or inve busine (1) h cli (2) c in Includ under the tra assets	spouse, or your dependent child (Sec CONTENTS OF REPORTS Part 8 or critoria) for the production of income settiment in a non-public trade or estimate in a non-public prade or had a value exceeding \$1,000 at the lose of the reporting period, and/or generated over \$200 in 'unearmot' come during the reporting period. de the above report for each (Fig. 200 at 100 a	None (or less than \$1,001)	\$15,000	1 3						\$1,000,001 - \$5,000,000	\$25.0	\$25,000,001 -\$50,000,000	Over \$50,000,000	None	Dividends	Part	Interest.	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	-\$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,030,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actua Amour Require if "Other Specifie
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7 S	SF Home Rental, Washington, DC	F		Г	Г	Γ	Г	x	П	П	П	П	П	Г	П	x	Π	П	П	Π	П	\neg	Г	Г	Г	x	Γ	П	П	П	П	П	П	_
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9	List underlying assets for Holding Companies	ı	Į	₽	₽	F	₽	₽	П	ρ	Д	Д	П	F	Ρ	₽	Д	Д	I	Д	₽	\Box	₽	₽	₽	P	F		H		Н	Н	\blacksquare	

JOE FILER						_		A			Tear	nsac	dia.	(~)	÷	=
	nge by you, your spouse, or dependent DRTS Part B of Instructions) during the		nsact				Γ	A.III	Juli		IIai	15-01	101	(x)	П	Г
reporting period of any real property, other securities when the amount of include transactions that resulted in involving property used solely as you between you, your spouse, or depen properties are involved in any report	stocks, bonds, commodity futures, and the transaction exceeded \$1,000. a loss. Do not report a transaction or personal residence, or a transaction ident child. Please clarify which two	Purchase	Sale	Exchange	Transaction Date (Mo., Day, Yr.)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,000 - \$1,000,000	Dver \$1,000,000***	\$1,000,001 - \$5,000,000	55,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Oue 650,000,000
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Example: DC, (DC) Microsoft (stock) h		X	x		2/1/0X 1/27/0X	Н	×	Н	х	E	X	Â	м	P	÷	Ė
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1					on described in the ins		_								_	_

000	JOE FILER		PART V. GIFTS	Page Number
p.: thi Do no by he co	CONTENTS OF REPORTS Part B of eshold. "Gift" is defined in the Instruc- clude: (1) Bequests and other forms waysapers and periodicals; (4) Consun- persons other than yourself; (5) Gifts or relationship to you; (7) Gifts from rel	f Instructions), from each source. Git sions. so in inheritance; (2) Political campaignable products provided by home state received prior to your Federal employ strives; (8) Personal hospitality of any g; and (10) Food, lodging, transports	in S300 in value received by you, your spouse, or your dependent is with a value of \$140 or less need not be aggregated towards it contributions; (3) Communications to your offices including subset to businesses to your offices, if those products are intended for co- ment; (6) Gifts to your spouse or dependent child stably indepen- individual (see instructions; (9) meals and bevarages unless control, on, and entertainment provided by a foreign government within a	criptions to ensumption dent of his o sumed in
	Name of Income Source	Address of Source	Dates and Brief Description	Gift Value
'n	emple: Mr. John Q. Smith	Anytown, VA Example	August 12, 200X, Silver platter - Ethics Committee weiver granted	\$400
	CHARLES GENEROUS	WASHINGTON, DC	July 9, 2011 - Marble Statue	\$ 500
à			(Ethics Committee Waiver Granted)	
3				
			horize their acceptance which ation of Senate Rule 35	
,	JOHN GERTZ	(?) 5	July 8, 2011 – Marble Statue – waiver granted	\$ 500
	DAVE WALTER	NAPLES, FL	Royal Palm Tree – waiver granted (? – Date)	\$ 300
0			dress of Source	
	te: The Senate Gift Rule prohibits mo			

SELECT COMMI	TTEE ON ETHICS
No Gifts from	m Lobbyists
Members, officers, and Senate may no longer a registered lobbyist or for agent, or an entity that employs or retains the same, unless a specific exception to the Gifts Rule applies.	ccept any gift from a preign

Select Committee on Ethics

Financial Disclosure



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speak in my official capacity as head of Ethics training.	 Submit a copy to the Ethics Committee at least 30 days prior to travel. Make sure all signatures and dates are filled in before form is turned in. Available on-line
Common (officer) Sense Among the control of the companion, to compare an enablementation for companion (officer) and a sensitive control of the companion (officer) and officer is a fixture supplies on an efficiently, and off officer is a fixture supplies on an efficiently, and off officer is common for agreement for the order of the companion of the order of the companion of	Travel reported more than 30 days after completion of travel should be reported on Part VI – Reimbursements of your Public Financial Disclosure Form.

Employee	Post-Travel Di	sclosure of Trave	Expenses	Date Time Street	Employee
Part Travel Filing S turni. Submit all for	antractions: Completes of Pe	te this form within 30 di shile Kacordo in 212 Ha	eys of returning from rt Building.		Post-Travel
be reimbursed just fo	ir me. I also certify th	at I have attached:		turns expenses that have been or will	Disclosure of Travel
X The <u>original</u> Emp. X A game of the Pen.	nane Sponcuer Transil C	orization (Form RE-1), exploration Form with a	attachments (dineral	y, invites list, etc.)	Ermonece
Private Sponsor(i) (Sr	##0 Fa	ctfinders, Inc			Expenses
Travel deeds	March 15 -	17, 2011			
Name of accompany's Relationship to Travel BY THE COST OF LOD DICLUDE LODGESTO Exposure for English	SEC Spour C SCOIG DED NOT ENCI COSTS DI EMPLOYEE	Child	COMPANYTHIS SPOX	SE OR DEPRODRIT CHELD, ONLY	 All Staffers fill out Employee Pre-Travel Authorization and Employee Post-Travel
Contract on Congress	Transportation Expenses	Ledging Expenses	Med Espense	Other Expenses (Names of A Description)	Disclosure of Travel Expenses
X Good Fields Entirente C Actual Assertan	\$ 625	\$ 275	\$ 150		forms. Forms should be filed with
Expenses for Accoun	Transportation Expenses	Lodging Expenses	Med Espense	Other Expenses (Automat & Description)	OPR within 30 days after
X Good Faith Enterent C Actual Assertant	\$ 625		\$ 150		completion of travel. Make sure all signatures and
	attached It		te Rule 15.3(406). (J	ittada additional pages if	dates are filled in before form is turned in to OPR.
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8/12/11	Joe F		3	oe Filer	
(Dene)		name of transier)		(Signature of transier)	
I have made a determi	ination that the expen	G MEMBER OFFICER: sec set out above in com- stion, ledging, and relate	ertions with turnel de d'expenses as defined	cribed in the Employee Pre-Trevel in Rule 15.	Travel reported more than 30 days after
8/14/11 (See (Section 1311)	_	_	Z. Senat	OV. Perm RE-2	completion of travel should be reported on Part VI – Reimbursements of your Public Financial Disclosure Form.

• Intro

DISCI This disclosure, along attachments, MUT is Building, within 10 d In compliance with	DRS AND OFF LOSURE OF 1 to provided to the Off- leys after the trend in o Rule 25 2(s) and (s), and to turnel manner	TRAVEL EXP one Species Travel Co or of Public Records, regional. Z. Se Otime of Se	ENSES withouton Form and a floom 100 of the Re nator	make the following	Senators and Officers Post-Travel
Private Spencer(1)					2 030 21000
Travel dental:	March 15				Disclosure of Travel
Destination(c)	Naples, Fl	orida			P
	ying family member when Officer: W See		Z. Senator		Expenses
SPOUR OR DEPEN- INCOME?) Expenses for Seaso Cod Faith Estimate C) Actual Assess	EMPT CHELD, ENLY	Ledging Expenses \$ 275	Med Expenses \$ 150	AME DATA TO THE ACCOMMANTING THE EXPONENT AND AMERICAN PAPER TO THE EXPONENT AND ACCOMMAND AND ACCOMMAND ASSESSMENT AND ACCOMMAND ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT AS	Forms should be filed with OPR within 30 days after completion of travel. Make sure all signatures and dates are filled in before form is turned in to OPR. Available on-line
			d. See Sesare Rule	35.260(6). (Attack additional pages if	
secensary)_Sec	e attached I	tinerary.			
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Rep	porting inc J	OE FILER		P.	ART VI.	REIMBURSEMENTS	7
of or sa se	nd/or d herwis ganiza ame sp eparate	ependent child in connection e). Disclosure is required re- tion. A description of the itin ionsor (and the trips added to e trip does not equal more that	with your provision pardless of whethe erary, including dar gether are worth m n \$350. Report Gi	of services at a r those expense te(s) and the na nore than \$350), ifts of travel in P	a speaking e es were rein ture of expe , then you m Part V.	\$350 in value during the reporting period receivingsgement, fact-finding event, or other event (p bursed to the individual or paid directly by the isses is required. If you are reimbursed for more ust report each trip individually, even if the reimbursens or by a foreign government; reimbursen	ersonal campaign, or sponsoring than one trip from the bursement for each
fu	nds wit	nich are reported to the FEC:	reimbursements to	a spouse or de	ependent ch	Id totally independent of his or her relationship to 5. For further information, see Instructions.	
L	- 1	Name of Income Source	Address	of Source		Dates and Brief Description	
Ex	ample:	All States Company	Maintown, TX	EXAMPLE	Roundtrip a for speaking	ir travel from Washington, D.C. to Maintown, TX and gengagement: May 1-3, 201X EXAMP	lunch for self and spouse PLE
1							
2	Fai	ctfinders, Inc.	Orlando	,FL	Roundtrip Speaking	air and lodging, and meals from Wash, DC to Engagement, March 15 – 17, 2011	Naples, FL for
3							
4	1	ravel reported o	n Rule 35	forms -			
5		 Employee F 	re-Travel	Authoriza	ation		
6		Employee F	Post-Travel	Disclosu	ire of 7	ravel Expenses	
7		Senators ar	d Officers	Post-Tra	vel Dis	closure of Travel Expenses	
8	ŗ	oursuant to Rule	35 (within	30 days	of trave	el) does not have to be disc	losed again
9			ì	<u> </u>		·	
10	Ru	ssell Company	(?) <	Roundtri	air from DC to San Diego, CA, lodging and	d meals (_ ?)
11		-					
12							
13				Include the Include the		of Source e Dates and Brief Description	

Ra	JOF	FILER		PART VII.	LIAB	ILITIE	s									200	8	×
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C di pr sr cr	ONTENTS C uring the repo eriod. Exclude ocured by aut	OF REPORTS Part orting period. Che de: (1) Mortgages of tomobiles, househ	B of Instructions), to a ck the highest amount on your personal reside old furniture or applian	se, or dependent child (See p.3 ny one creditor at any time owed during the reporting ances unless rented; (2) loans ces; and (3) liabilities owed to for reporting revolving charge	Date Incurred	Inferest Rate	Term if Applicable	\$10,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,000,***	000,0001 - \$5,000,000	\$5,000,000 - \$25,000,000	\$25,000,000 - \$50,000,000	\$50,000,000
L	Name o	of Creditor	Address	Type of Liability				\$10,	\$15,	880	\$100	\$250	3800	<i>997</i> O	\$1,0	85,0	\$25	Over
Г	S, Example: DC	First District Bank	Wash, DC	Mortgage on undeveloped land	1991	13%	25yrs			х		Ε	Х	Α	М	Р	L	Ε
П	or J	(J) John Jones	Wash., DC	Promissory Note	1999	10%	On dmd				x	Е	х	Α	м	P	L	Ε
1	LEG BRE	AKER BANK	NY, NY	UNSECURED LOAN	2011	100%	on dmd		х									Г
2																		Г
3																		Г
4																П		Г
5									П							П		Г
6									П							П		Г
7	First US I	Bank	Baltimore, MD	Unsecured Loan	2010	(?)	(?)		П	х								Г
8						1			П									Г
9																		Г
10			Do n	ot leave items (Interest	Rate	, Tern	n if A	ppl	ica	ble) е	mp	ty.					
11																		
12																		
EX	EMPTION TEST : This category appli	(see instructions before m les only if the asset is/was t	sarking box): If you omitted any seld independently by the spouse	asset because it meets the three-part test for or dependent child. If the asset is/was either he	exemption ld by the fil	describes ler or jointly	d in the ins held, use	truction the off	ons, pl	lease egorie	chedi s of v	box t	o the s app	right. roprisi				J

Select Committee on Ethics - Jinancial Disclosure

officer, enterpr held.	director, trustee, general partri ise or any non-profit organizati	ng the applicable reporting period wh er, proprietor, representative, employ on or educational institution. Both th rnment, religious, social, fraternal, or	yee, or consultant of any corpo e year and month must be repo	ration, firm, partnership, o orted for the period of time	or other busine e that the posi	ess
	Name of Organization	Address (City, State)	Type of Organization	Position Held	From (Mo/Yr)	To (Mo/Yr
Framele	National Assn. of Rock Collectors		Non-profit education	President	6/90	Present
	Jones & Smith	Hometown, USA EXAMPLE	Law Firm	Partner	7/95	11/GK
1 DEV	WEY, CHEATUM & HOWE	NEW YORK, NY	Non-Profit Education	DIRECTOR	5/09	Presen
² GO	OD SAMARITIAN CHARITY	WASHINGTON, DC	CHARITY	BOARD MEMBER	1/10	2/11
3						
4						
5						
6						
7						
8						
9	Remember t	nat compensation i	in excess of \$20	00 from any p	position	
10	must be repo	orted on Part II (Ea	rned and Non-I	nvestment In	come)	
11			1	1	1	
12						

JOE	FILER	PART IX. AGREEMENTS O	R ARRANGEMENTS	10
of or	other intellectual property),	rrangements for future employment (including agreem leaves of absence, continuation of payment by a forr an employee benefit plan. See Instructions regarding	mer employer (including severance payme	ents),
	Status and Terms	of any Agreement or Arrangement	Parties	Date
Example		t, will receive lump sum payment of capital account & pertnership irmed through 11/0X and retained pension benefits (diversified, fed. defined contribution plan)	Jones & Smith, Hometown, USA Example	1/93
Example	Employment agreement with XYZ agreement include salary between options	Co. to become Vice President of Government Relations. Terms of \$50,001-\$100,000, signing bonus between \$2,501-\$5,000 and stock	XYZ Co., Berhesde, MD Example	1/0X
		Agreement, will remain in Partnership ntributions to Plan from Partnership or Self)	DEWEY, CHEATUM & HOWE	1/11
3				
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FIRST TIME FILERS ONLY: Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting the names of clears and customers of any corporation, tim, partnership, or other business enterprise, or any non-profit organization provided the services to the clears surder outsomers of the firm that generated is see or payment of more than \$5,000. You need not Conventional as a local source Name of Source Answer Source	when you directly report the U.S.
the names of clients and customers of any corporation, time, pathnership, or other business enterprise, or any non-portif organization provided the services to the clients and/or customers of the firm that generated a fee or payment of more than \$5,000. You need not to Government as a source. Name of Source Brief Description of E	when you directly report the U.S.
Insuration to the Insurance TV	luties
Amount Smith	
	EXAMPLE
Metro University (client of Jones & Smith Moneytown, USA Legal Services in connection with university construction	ion EXAMPL
¹ DEWEY, CHEATUM & HOWE New York, NY Legal Services	
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4 CLIENT LIST	
5 - Mike Vic New Orleans, LA Legal Services	
6 - Lizzy Lohan Los Angeles, CA Legal Services	
7 - Chuck Sheen Hollywood, NY Legal Services	
8 - Super Landlord, Inc. New York, NY Legal Services	
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If you have any questions, please contact the Committee
(202) 224-2981 (main) (202) 224-7416 (fax)
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