
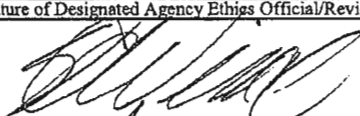
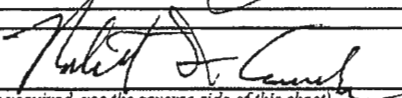


# Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	Reporting Status (Check appropriate boxes) <input type="checkbox"/> Incumbent	Calendar Year Covered by Report	<input checked="" type="checkbox"/> New Entrant, Nominee, or Candidate	<input type="checkbox"/> Termination Filer	Termination Date (if Applicable) (Month, Day, Year)	<b>Fee for Late Filing</b> Any individual who is required to file this report and does so more than 30 days after the date the report is required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period shall be subject to a \$200 fee.
Reporting Individual's Name	Last Name Rose		First Name and Middle Initial Charles P.			
Position for Which Filing	Title of Position General Counsel		Department or Agency (if Applicable) United States Department of Education			<b>Reporting Periods</b> <b>Incumbents:</b> The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code) Franczek Radelet & Rose 300 S. Wacker #3400 Chicago, IL 60606		Telephone No. (Include Area Code) 312-786-6161			
Position(s) Held with the Federal Government During the Preceding 12 Months (if Not Same as Above)	Title of Position(s) and Date(s) Held None					<b>Termination Filers:</b> The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable.
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nominator Senate HELP Committee		Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>Certification</b>	Signature of Reporting Individual		Date (Month, Day, Year)			<b>Nominees, New Entrants and Candidates for President and Vice President:</b> <b>Schedule A</b> --The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets as of any date you choose that is within 31 days of the date of filing.
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.			03-16-2009			
<b>Other Review</b> (If desired by agency)	Signature of Other Reviewer		Date (Month, Day, Year)			<b>Schedule B</b> --Not applicable. <b>Schedule C, Part I (Liabilities)</b> --The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date of filing.
<b>Agency Ethics Official's Opinion</b>	Signature of Designated Agency Ethics Official/Reviewing Official		Date (Month, Day, Year)			
On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below).			3/20/09			<b>Schedule C, Part II (Agreements or Arrangements)</b> -- Show any agreements or arrangements as of the date of filing. <b>Schedule D</b> --The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.
Office of Government Ethics Use Only	Signature		Date (Month, Day, Year)			
				3/24/09		
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)						
(Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/>						
(Check box if comments are continued on the reverse side) <input type="checkbox"/>						
						<b>Agency Use Only</b>
						MAR 17 2009
						<b>OGE Use Only</b>
						MAR 20 2009



Reporting Individual's Name  
 Charles P. Rose

**SCHEDULE A continued**  
 (Use only if needed)

BLOCK A	BLOCK B								BLOCK C																
	Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																
	None <input type="checkbox"/>	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	Over \$1,000,000 *	None	Dividends	Rent and Royalties	Interest	Capital Gains	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 - \$500,000	Over \$1,000,000*	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)
1			X								X		X												
2			X										X												
3			X							X			X												
4			X										X												
5			X							X				X											
6			X							X			X												
7				X							X		X												
8			X							X				X											
9				X						X			X												

\* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Reporting Individual's Name  
 Charles P. Rose

**SCHEDULE A continued**  
 (Use only if needed)

Page Number  
 4

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B										Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. BLOCK C																						
		None (or less 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	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type	Amount										Date (Mo., Day, Yr.)						
																Dividends	Rent and Royalties	Interest	Capital Gains	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	Other Income (Specify Type & Actual Amount)	Only if Honoraria		
1	Banc of America Investment Services - Nuveen Select Quality Mun FD Inc Trade Symbol NQS		X										X				X																	
2	Banc of America Investment Services - Schlumberger Ltd Trade Symbol SLB		X												X						X													
3	Banc of America Investment Serv. IRA- Columbia Cash Reserves Daily Trade Symbol NSHXX	X											X							X														
4	Banc of America Investment Serv. IRA- Rabobank NA El Centro CA Trade Symbol 74977NGZO			X																X														
5	Banc of America Investment Serv. IRA- American Fundamental Inv Class A Trade Symbol ANCFX		X										X				X			X														
6	Federated Funds Federated Kaufmann Fund Trade Symbol KAUFX			X									X							X														
7	Janus Janus Contrarian Fund Trade Symbol JSVAX		X										X		X						X													
8	Janus Janus Global Life Sciences Fund Trade Symbol JAGLX			X									X		X					X														
9	Intentionally Left Blank																																	

\* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Reporting Individual's Name  
 Charles P. Rose

**SCHEDULE A continued**

(Use only if needed)

BLOCK A	BLOCK B								BLOCK C																		
	Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																		
None <input type="checkbox"/>									Type		Amount								Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria							
	None (or less than \$1,000)	\$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 *	Excepted Investment Fund	Excepted Trust	Dividends	Rent and Royalties	Interest	Capital Gains	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
1	Janus Janus Money Market Trade Symbol JAMXX				X				X		X					X											
2	MetLife, Inc. Trade Symbol MET		X												X												
3	Prudential Financial, Inc. Trade Symbol PRU		X							X				X													
4	Prudential Financial, Inc. CSV Whole Life Insurance			X						X					X												
5	ING Fixed Universal Life CSV Life Insurance - Spouse		X											X													
6	Citi Smith Barney IRA - Spouse Citibank NA South Dakota - Cash			X						X				X													
7	Fidelity Investments - Profit Sharing Pln FID Contrafund Trade Symbol FCNTX			X					X		X				X												
8	Fidelity Investments - Profit Sharing Pln FID Cap Appreciation Trade Symbol FDCAX				X				X		X			X													
9	Fidelity Investments - Profit Sharing Pln Spartan US EQ Index Trade Symbol FUSEX					X			X		X						X										

\* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.



Reporting Individual's Name  
 Charles P. Rose

**SCHEDULE A continued**

(Use only if needed)

BLOCK A	BLOCK B								BLOCK C																		
	Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																		
	None (or less than \$1,000)	\$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 *	None (or less than \$201)	Dividends	Rent and Royalties	Interest	Capital Gains	\$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	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)		
<input type="checkbox"/> None																											
1		X								X				X													
2				X						X						X											
3				X						X						X											
4					X																				Monthly pension of \$8,050 upon age 65		
5																											
6																										Salary S-Corp Gross Income \$259,750	
7		X								X				X													
8			X											X													
9		X								X			X														

\* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Reporting Individual's Name  
 Charles P. Rose

**SCHEDULE A continued**  
 (Use only if needed)

BLOCK A	BLOCK B								BLOCK C																														
	Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																														
	None (or less 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 - \$2,500,000	\$2,500,001 - \$5,000,000	Over \$5,000,000	Excepted Investment Fund	Excepted Trust	Qualified Plan	Type	Amount									Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only if Honoraria												
																Dividends	Rents and Royalties	Interest	Capital Gains	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 - \$300,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000							
1	None <input type="checkbox"/>																																						
	US Bank - Cash																		X																				
2	LaSalle Financial Services Helmerich & Payne Trad Symbol HP																X																						
3	Franczek Sullivan & Rose, P.C. Separation Payment																			X																			
4																																							
5																																							
6																																							
7																																							
8																																							
9																																							

\* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher category.

**Do not Complete Schedule B if you are a new entrant, nominee, Vice Presidential or Presidential Candidate**

Reporting Individual's Name <b>Charles P. Rose</b>	<b>SCHEDULE B</b>	Page Number <b>8</b>
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**Part I: Transactions**

None

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction solely between you your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

	Identification of Assets	Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (x)														
		Purchase	Sale	Exchange		\$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	Certificate of divestiture			
	Example: Central Airlines Common	x			2/1/99				x											
1																				
2																				
3																				
4																				
5																				

\* This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

**Part II: Gifts, Reimbursements, and Travel Expenses**

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$260; and (2) travel-related cash reimbursements received from one source totaling more than \$260. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by

the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$104 or less. See instructions for other exclusions.

None

	Source (Name and Address)	Brief Description	Value
	Examples: Nat'l Assn. of Rock Collectors, NY, NY Frank Jones, San Francisco, CA	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Leather briefcase (personal friend)	\$500 \$300
1			
2			
3			
4			
5			



Do not Complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

Reporting Individual's Name  Charles P. Rose	<b>SCHEDULE B continued</b> (Use only if needed)	Page Number  9
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**Part I: Transactions**

	Identification of Assets		Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (x)													
			Purchase	Sale	Exchange		\$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*	\$5,000,000	\$25,000,000	\$50,000,000	Over	Certificate of divestiture	
	Example:	Central Airlines Common	x			2/1/99			x											
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				

\* This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Reporting Individual's Name <b>Charles P. Rose</b>	<b>SCHEDULE C</b>	Page Number <b>10</b>
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**Part I: Liabilities**

Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

Creditors (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)																	
					\$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	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							
Examples: First District Bank, Washington, DC John Jones, 123 J St., Washington, DC	Mortgage on rental property, Delaware Promissory note	1991 1999	8% 10 %	25 yrs. on demand																		
1 RayMark Venture, LLC 222 Merchandise Mart, P.O. Box 3025, Chicago, IL	Lease on Buci, Inc. dba Olive Shop at 5254 N. Magnolia, Chicago, IL	10/06	None	5 years																		X
2 Bank of America P.O. Box 660576, Dallas, TX	\$100,000 Line of credit; proceeds used to fund start-up costs for Buci, Inc.	03/08	3%	1 year	X																	
3																						
4																						
5																						

\* This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

**Part II: Agreements or Arrangements**

Report your agreements or arrangements for: continuing participation in an employee benefit plan (e.g. 401k, deferred compensation); (2) continuation payment by a former employer (including severance payments); (3) leaves of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.

Status and Terms of any Agreement or Arrangement	Parties	Date
Example: Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Doe Jones & Smith, Hometown, State	7/85
1 Franczek Radelet & Rose, P.C. - Defined benefit pension plan; upon retirement age 65, participant receives a projected monthly benefit of \$8,050	Franczek Radelet & Rose, P.C. Chicago, IL	01/02
2 Franczek Radelet & Rose, P.C. - Defined Contribution and Profit Sharing and Savings Plan; filer will receive a final contribution equal to 3% of compensation for 2009	Franczek Radelet & Rose, P.C. Chicago, IL	02/94
3 Franczek Radelet & Rose, P.C. - Will receive repayment of capital account and separation payment prior to appointment	Franczek Radelet & Rose, P.C. Chicago, IL	02/94
4		
5		
6		

Reporting Individual's Name <b>Charles P. Rose</b>	<b>SCHEDULE D</b>	Page Number <b>11</b>
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**Part I: Positions Held Outside U.S. Government**

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or

consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Exclude positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1	Advance Illinois 50 East Washington, Suite 401, Chicago, IL 60602	Non-profit education advocacy	Member, Board of Directors	02/08	Present
2	Facing History and Ourselves 200 East Randolph, Suite 2100, Chicago, IL 60601	Non-profit education	Member, Chicago Advisory Bd	09/99	Present
3	National College of Education- Lewis University Chicago Campus 122 S. Michigan Avenue, Chicago, IL 60603	Education Institution	Member, Advisory Board	10/08	Present
4	Franczek Radelet & Rose, P.C. 300 South Wacker Drive, Suite 3400, Chicago, IL 60606	Law firm	Partner	02/94	Present
5					
6					

**Part II: Compensation In Excess Of \$5,000 Paid by One Source**

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any

corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate

None

	Source (Name and Address)	Brief Description of Duties
Examples:	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1	Arlington Heights School District 214	Legal services
2	Champaign Community Unit School District 4	Legal services
3	Chicago Board of Education	Legal services
4	Chicago Park District	Legal services
5	City of Chicago	Legal services
6	Des Plaines Community Consolidated School District 62	Legal services

Reporting Individual's Name Charles P. Rose	<b>SCHEDULE D</b>	Page Number 12
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**Part I: Positions Held Outside U.S. Government**

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or

consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. **Exclude** positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1					
2					
3					
4					
5					
6					

**Part II: Compensation In Excess Of \$5,000 Paid by One Source**

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any

corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate

None

	Source (Name and Address)	Brief Description of Duties
Examples:	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1	Illinois Resource Center	Legal services
2	Lincolnwood School District 74	Legal services
3	North Chicago Unit School District 187	Legal services
4	Schaumburg Community Consolidated School District 54	Legal services
5	School District 102 (LaGrange)	Legal services
6	Thornton Township High School No. 205	Legal services

Reporting Individual's Name <b>Charles P. Rose</b>	<b>SCHEDULE D</b>	Page Number <b>13</b>
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**Part I: Positions Held Outside U.S. Government**

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or

consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Exclude positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1					
2					
3					
4					
5					
6					

**Part II: Compensation In Excess Of \$5,000 Paid by One Source**

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any

corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate

None

	Source (Name and Address)	Brief Description of Duties
Examples:	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1	Tri-State Fire Protection District	Legal services
2	Franczek Radlet & Rose, P.C.	Legal services
3		
4		
5		
6		