Form Approved:

5 C.F.R Part 2634

## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

OMB No. 3209-0001

U.S. Office of Government Ethics								
Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	Reporting Status (Check	Incumbent	Calendar Year Covered by Report		New Entrant, Nominee,	Termination	Termination Date (If Appli- cable) (Month, Day, Year)	Fee for Late Filing Any individual who is required to
Jan 20, 2009	appropriate boxes)		2008	Х	or Candidate	Filer		file this report and does so more than
Jan 20, 2005	I and Manage		2000		Circt Name and Middle	Initial		30 days after the date the report is required to be filed, or, if an extension
Reporting Individual's Name	Last Name				First Name and Middle	ınıttai		is granted, more than 30 days after the
Reporting marvidua 3 rume	Crutchfield				Danielle M			last day of the filing extension period
	Title of Position				Department or Agency (	If Applicable )		shall be subject to a \$200 fee.
Position for Which Filing	Director of Scheduli	ng for the	President		Scheduling and Ad	vance in the Whi	te House	Reporting Periods
	Address (Number, Street,	City, State.	and ZIP Code)			Telephone No. (Inc.	lude Area Code)	Incumbents: The reporting period is
Location of Present Office	451 6th St. NW Was					202-487-7258		the preceding calendar year except Part II of Schedule C and Part I of
(or forwarding address)	451 out St. NVV VVas	inington, t						Schedule D where you must also
Position(s) Held with the Federal	Title of Position(s) and I	Date(s) Held						include the filing year up to the date
Government During the Preceding	n/a							you file. Part II of Schedule D is not applicable.
12 Months (If Not Same as Above)	11// d							аррисаоте.
	Name of Congressional	Committee (	Considering Naminatio		Do You Intend to Creat	te a Qualified Diversi	fied Trust?	Termination Filers: The reporting period begins at the end of the period
Presidential Nominees Subject to Senate Confirmation	Name of Congressional	Committee C	Considering Normatio	11	Do 1 ou linend to Creat	e a Quantiled Diversi	illed Itust:	covered by your previous filing and ends
Strate Courination					Yes	No		at the date of termination. Part II
							V and	of Schedule D is not applicable.
Certification  I CERTIFY that the statements I have	Signature of Reporting I	ndividual	77 4			Date (Month, Day,		Nominees, New Entrants and
made on this form and all attached	10m		· // / / // //		' /	0.01	8 2009	Candidates for President and Vice
schedules are true, complete and correct to the best of my knowledge.	1 2 1100	WJC	Mull	1		PED,	8,2009	President:
	Signature of Other Revie	wer /				Date (Month, Day,	Vagu	income (BLOCK C) is the preceding
	Signature of Other Nevice	Λ				Date (Monin, Day.	Teur I	calendar year and the current calendar
Other Review	1	/}				1 -	1 0	year up to the date of filing. Value assets as of any date you choose that is
(If desired by agency)	1/, $1/$ ,	$\nu_{\Lambda}$	_			2/19	107	within 31 days of the date of filing.
Agency Ethics Official's Opinion	Signature of Designated	Agency Eth	ics Official/Reviewing	Offici	al	Date (Month, Day,		Schedule B-Not applicable
On the basis of information contained	/	0 4						7
in this report, I conclude that the filer is in compliance with applicable laws and	11/. 1	14				3/16/19		Schedule C. Part I (I jabilities)— The reporting period is the preceding
regulations (subject to any comments	14-1.					3//•//		calendar year and the current calendar
in the box below).	Signature					Date (Month Day	Vacca	year up to any date you choose that is within 31 days of the date of filing.
Office of Government Ethics	Signature					Date I Monin Dav	Tear)	Within 31 days of the date of fining.
Use Only								Schedule C Part II (Agreements or
Comments of Reviewing Officials (If additional addition	onal space is required, use	the reverse	side of this sheet)					Arrangements) Show any agreements or arrangements as of the date of
			(Chaok h	or if fi	ling extension granted &	indicate number of	davs	filing.
			(Check bi	ox ij jii	ling extension grantea $\alpha$	indicate number of	adys	Schedule DThe reporting period is
								the preceding two calendar years and
								the current calendar year up to the
								date of filing.  Agency Use Only
								OGE Use Only
					(Check box if comme	ents are continued on	the reverse side	OGE USE Only
					·			

0	-	70	(ICEV.	03/2000)	
5	C.	F.F	Pan	2634	

Reporting Individual's Name	_	_			_	_	_	_		_	_		_	_						_			_		_		_	_			Page Number	
Reporting incividuals Name												S	CJ	HE	DI	JL	E.	A													Tage Number	
Assets and Income  BLOCK A				Val	a repo	t clo	of ose o g pe CK E	of criod													l am led i			C f		hat i			n \$2	"(10	' is checked. no	
		8	200000		******	BLO		7		-1	0000000	$\dashv$	6000000			_	787		_							_	_					_
For you, your spouse, and dependent children, report each asset held for investment or the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period, or which generated more than \$200 in income during the reporting period, together with such income.				0	90	90	.000		99,000	000,000	900,000,		ient Fund		£8 83		Ty	pe_		\$201)					Am	oun	98		0,000		Other Income (Specify Type &	Date (Mo., Day, Yr.)
For vourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spot report the source but not the amount of earned income of more than \$1,000 (except report the actual acount of any honoraria over \$200 of your spouse).  None	use.	\$1,001 - \$15,000	\$15,001 - \$50,000	550,001 - 5100,000	900,0522 - 1,00,001.8	\$250,001 - \$500,000	S500,001 - \$1,000,008	Over \$1,000,000 *	\$1,000,001 - \$ 5,000,000	55,000,001 - 525,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Onalified Trest	Dividends	Rent and Royaltie	Interest	Capital Gains	None (or less than	S201 - S1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	85,001 - \$15,000	\$15,001 - \$50,000	550,001 - \$100,000	S100,001 - S1,000,0	Over \$1,000,000*	S1,000,001 - S5,000,000	Over \$5,000,000	Actuał Amount)	Only if Honoraria
												_																				
Examples Doe Jones & Smith, Hornetown, State Kempstone Equity Fund IRA: Heartland 500 Index Fund		-	<u> </u>	_×_			; ;	_ _ _					 X		 	<u>×</u>		 	•			_×	<u>.</u>	x		- 1					Law Partnership latome \$150,00	
Obama for Amercia     WAMU Savings Account     WAMU Checking Account	×			X																××	رور	,									\$83,000 W	
2 Obama-bide Transition Pap	jed .																														\$ 17,4913M	
3																																
4																																
5																																
6																																
This category applies only if the asset/incom	ne is sole	ely th	at of	the	filer	's sp	ouse	or d	eper	iden	t chi	ldre	n. 1	f the	asse	Vinc	come	e is e	eithe	r the	at of	the f	iler	or io	inth	y hel	d by	the	iler	with	the spouse or deper	dent children.

nark the other higher categories of value, as appropriate.

U.S. Office of Government Ethics Reporting Individual's Name			_	_	_	_	_	_	_		_		_		_	_	_	_	_	_		_		_	_	_	_	Page Number		_
Repoiling Ingraidual's Mabile								S	CF			JLE					ied	l										Fage Number		
										(U:	se	only	/ \f	nee	ded	1)					_						_			
Assets and Income				eport	close	of nerio							ľ	nco	one:	tvo ry is	e an	nd az eded	mour in E	nt. ] Bloc	k C i	one for t	that i	less	thar	\$2	011"	is checked. no		
	Some (ar less than \$1,000)	SI,001 - SI5,000 SI5 801 - S50,000	550,001 - 5100,000	\$100,001 - \$250,000	5250,001 - 3500,000 5500 001 - 81 000 000	Ver \$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 Rand	Excepted Trust	Confidence of the confidence o	Dividends	Гург	Caine	None (or less than \$201)	\$201 - \$1.0Mb	\$1,001 - \$2,500	\$2,591 - \$5,000	55,001 - 515,000	An 000055-100515	SS0,001 - S100,000	\$100.001 - \$1,960.500	Over 51,000,000*	S1,000,001 SS,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., E Yr.) Only Honore	Dav. ) / if
None	7	5	S		À		•	3	8	0	*	3					Ž	\$2	ıs	S	S	73	SS		0	ıs	Ó			
1																														
2																														
3																	S I													
4																														
5																														
6																														
7		a Vision																												
8																														
9	P)												SI																	
<ul> <li>This category applies only if the assertince mark the other higher categories of value, as a</li> </ul>	me is solel ppropriate	y that o	of the	filers	spot	use of	г Аср	ende	rit c	nildre	еп.	If the	ass	el/jra	csm	e is c	ithe	r tha	li of i	he f	ler o	i joi	nily	eld	by u	ខ ធ្វី	G W	ith the spouse or d	pendent c	hildr

U.S. Office of Government Ethics														_		_	_		_	_			_			_			Diam's Versal Said	
Reporting Individual's Name									9	SC	HE	D	ŬL	E	A c	on	tin	uec	ł										Page Number	
1											α	lse	onl	v if	fne	ede	d)												(	
		_				_				_				2			-	_	_		_				_	_	_	_	<u> </u>	
Assets and Income				Val	nati	ΔП	of A	eep	ts						Inc	om.	e tur	36.01	nd a	mau.	n/	፤ <i>ና</i> "እ	Jone	(05	احدد	than	520	۰ ۱۱۱۳	is checked. no	
Assets and income	ĺ				21	clos	e of		13			J		Į	othe	er en	try is	SDO	edec	in f	3100	k C	for t	that i	tem	1.	اشھا	,	is checked. Ito	
	- 1			N	•		регі	od						١									•	. ~						
BLOCK A	3		80000		B N	LOC	K B	\$88	881	18888	8			****	_	Тур		$\top$				BI	LOCK	ioun	•		_	_		
														8		191				Ī			A	1001						
	\$1,001)			000000000000000000000000000000000000000				9	ş	900		or Fund																	Other Income (Specify	Date (Mo., Dav, Yr.)
}	n Si			9	₽	8	S500.000 - \$1,000.000	CVET SI, OUT, COMMENS	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000		NS. 35				ŭ		300						٥	900		\$1,000,001 - \$5,000,000		Type & Actual	Onlyif
}	#	ş	\$15,001 - \$50,000	550,001 - 5100,000	\$100,001 - \$250,000	5250,001 - 5500,000	1 8	CVET SI, OUT, COM	ä	SS	Over \$50,000,000	Excepted Investm	Ę	3		Rent and Royaltie		<u> </u>		la	2	ş	3	550,001 - 5100,000	\$100,001 - \$1,000,000	Over S1,000,000*	300	8	Amount)	Нологаліа
}	Ž.	\$1,001 - \$15,000	35	-51				٤	3	19	8	5	Excepted Trust	Qualified Trest	qs	ž	Interest	None (or less the	COURT OF ORDER	51,001 - \$2,500	52,50f - \$5,000	55,001 - 515,000	\$15,001 - \$50,000	510	5	8		Over \$5,000,000	}	
}	9)	=	9	100	8	8			3	100	35	3	ep e		Dividends		Interest	3			3	8	ē	100	8	1S1,	¥.	2	}	
	No.	SI,0	515	550	Ē.	225		5	3	18	ð	å		8	Div	2	Pic Pic	3		1 5	13	3	2	SSO	ē	0	4	Sec.	}	
None																						-							}	
1	_	-				-			-	T	-		$\vdash$				-	-	H							-		-		
	**CO0027																													
2																														
3	-					-	₩-		-		-		Н			-		-	-			-				-		_		
																						L								
4						00000000																								
5	-	_		-		-	₩-	-#	-		-				-		- 8	#-		<b>-</b>	H					-		_	<del></del>	
8						-							П							Ť						_				
		_																		L_										
7																														l
															_		_			_		_								
[8]																													}	
9						000000																								
	-					0000																								
* This category applies only if the assertincomark the other higher categories of value, as a			nal o	fthe	filer	s sy	oust	υrd	epen	đent	chile	ren.	lf (	ne as	sse <i>U</i>	ncor	ne is	eith	er the	10 14	the	iler	or joi	mtly	held	ัช ชุ	ic fil	er w	ith the spouse or de	pendent childi
mark the other nigher categories of value, as a	Phiobital	C.																												

Reporting Individual's Name		_	_	_	_	_	_	_	_	_5	SCI	— HF	CD	IП	Æ	A	COL	ntii	n 11/	ed	_		_		_	_	_			_	$p_3$	ige Number	_	
											,			on						-														
		_		_	_	_											_		_	_						_	_							
Assets and Income  BLOCK A			_		al repo	tion at clo orting BLO	ose o	of eriod		S											l amo led in			C f		that i			n \$2	.013	" is	checked. no		
VIII ON THE STATE OF THE STATE		4						<u>i</u>						<b>a</b>			T	'pe		_	_	_	_		_	ioun			_				$\top$	
	None (or less than \$1,001)	31 I	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	5500,001 - 51,000,000	Over \$1,000,000 *	St.000.001 - \$ 5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted investment fund		Qualified Trust	Dividends	Royalties		Capital Gains	None (or less than \$201)	5201 - 51,000	51,001 - \$2,500	\$2,301 - \$3,000		\$15,001 - \$50,000		900	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	andandan ia	Other Income (Specify Type & Actual Amount)		Date (Mo., Dav. Yr.) Only if Honoraria
None								1														90000												
1																																		
2																S. Carlotte Control																		
3																																		
4																							1											
5																																		
8							85																											
7																																		
8																								No. of the last of										
9															3									202000000										
<ul> <li>This category applies only if the asset/income mark the other higher categories of value, as app</li> </ul>			iat o	fthe	file	צ צ'ז	pous	se or	der	pend	епі	child	dren	. If i	he a	issel	inco	me i	is ei	ther t	that c	of th	e fil	er or	r joi	ntly	held	by t	he fi	ler w	rith	the spouse or d	eper	ndent childr

Reporting Individual's Name						_			_		_			_				_			_	_		_		Pago Number	
Reporting Individual's Name								SC	H	ED	UL	${f E}$	A c	on:	tin	uec	i									1 2go 14dai.161	
									(	(Us	e on	ıly i	fne	ede	:d)												
	_		$\equiv$		$\equiv$	$\equiv$	_		=	_	_	_	_	_			$\overline{}$	_	_		$\overline{}$			_			
Assets and Income				luatio at c reporti	ose (	of																or les at ite		an \$2	011"	' is checked. no	
BLOCK A		0000			OCK I		como e	Re		-		•				_					OCK (						
None	None (or less than \$1,001)	\$15,001 - \$15,000	\$50,001 - \$100,000	\$100,001 - \$230,000 \$250,001 - \$50,000	OOF OUT TOO OUT	Over \$1,000,000 *	\$1,000,001 - \$ 5,000,000	\$5,000,001 - \$25,000,000	Cherry SSC 000 000	Latendal lavestment Purd	Excepted Trust	Ounified Trust		Rent and Royalties	Interest	None (or less than \$201)	\$203 - \$1.000	\$1,001 - \$2,500	52,591 - 55,000	Same Way		SS0,001 - \$100,000	Over St 000 noor	S1,000,000 - SS,400,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo Day, Yr.) Only if Honoraria
1								Î																			
2											-								No.						20000000		
3																											
4																											
5							3																				
6		ij	9																								
7			Contract of the Contract of th														E										
8																											
9									T			15															
<ul> <li>This category applies only if the asset/income mark the other higher categories of value, as appr</li> </ul>			of the	filer's	spou	se or	depe	nden	ı chi	låren	i. 1f	the a	ssel <sup>7</sup> i	nco	me is	eithi	er tha	tofi	ne fil	et or	joint	lly hel	d by	the ti	ler w	oth the spouse or dep	pendent childr

SF 278 (Rev. 03/2000)

Sc.F.R Part 2634 Do not Complete Schedule B if you are a new entrant, nominee, Vice Presidential or Presidential Candidate U.S. Office of Government Ethics

Re	porting Individual's Name		SCHEDULE	В			- · · · · ·							Page 1	lumber				<u> </u>
P	art I: Transactions							None	;										
Re	port any purchase, sale, or exchang dependent children during the repor	ge by you, your spouse,	report a transaction involving property used solely as your personal residence, or a transaction solely between you,		ansacti Type (x						Ai	nount o	of Tran	saction	(x)				
pro sec	operty, stocks, bonds, commodity fourties when the amount of the transpool. Include transactions that result	futures, and other nsaction exceeded ted in a loss. Do not	your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	Purchase	Sale	Exchange	Date (Mo., Day, Yr.)	\$1,001 -	\$15,001 -	\$50,001 -	\$100,001 -	\$250,001 -	\$500,001 -	Over \$1,000,000*	\$1,000,001 -	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Certificate of divestiture
•	Example: Central Airlines Common	Identific	ation of Assets		S	Ш	2/1/99	₩ ₩	£ 53	₩ ₩	₩ ₩	\$ \$	8 8	Ó₩	\$ \$	\$ 25	\$ 53	Ó %	<u>उ</u>
1	NOT REQUIRED FOR N	OMINEES		x			2/1/99		_	_ x									
2																			
3																			
4																			
5																			-
			nat of the filer's spouse or dependent children. If the underlyi			ther h	neld												
by	the filer or jointly held by the filer	with the spouse or deper	ndent children, use the other higher categories of value, as ap	ргоргіа	te.														
P	art II: Gifts, Reimbur	sements, and T	ravel Expenses																
Fo foc (2) tha as au	or you, your spouse and depende on, and the value of: (1) gifts (suce od, or entertainment) received from travel-related cash reimbursem an \$260. For conflicts analysis, in personal friend, agency approvation thority, etc. For travel-related gi	nt children, report the chas tangible items, tracom one source totaling ents received from one it is helpful to indicate al under 5 U.S.C. § 411 fts and reimbursements	source, a brief descrip- ansportation, lodging, more than \$260; and source totaling more a basis for receipt, such 1 or other statutory s, include travel itinerary.	receinde the c total	ved f pende lonor value	rom ent of 's res e from	rnment; giv relatives; r f their relat sidence. Als m one sour usions.	eceive ionshi	d by y	our sour o	pouse r prov	or de rided : regati	epend as per ng gif	ent che sonal ts to c	ild to hospi letern	tally tality tine the tructi	at ne		
qai	tes, and the nature of expenses n	provided Exclude any	thing given to you by																
	Source (Name and Examples: Nat'l Assn. of Rock Collec				ief Des	<u> </u>												Value \$500	
	Frank Jones, San Francisco		Airline ticket, hotel room & meals incident to national conference 6/ Leather briefcase (personal friend)	13/99 (p	ersona	activ	vity unrelated	to duty										\$300	
1																			
2																			
3																			
4																			
5																			

rior Editions Cannot Be Used.

Reporting Individual's Name		SCHEDU	LE C									Page N	umber			
Part I: Liabilities														_		
Report liabilities over \$10,000 owed to any any time during the reporting period by you		personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and		No	ne X		_	,	Catego	ory of A	Amount	or Val	ue (x)			
or dependent children. Check the highest a during the reporting period. <b>Exclude</b> a mor		liabilities owed to certain relatives listed in instructions.  See instructions for revolving charge accounts.	Date Incurred	Interest Rate	Term if applicable	,001 - ,000,	.001 -	,001 - 0,000	0,001 -	0,001 -	\$500,001 -	er 2000,000	200,000	- 100,000,	.000,000,	,000,000
Creditors (Name and Ad		Type of Liability				\$15	\$15 \$50	\$50 \$10	\$10	\$25 \$50	\$1,0	§ £	\$5.0	\$25	\$25	\$50
Examples: First District Bank, Washington, D John Jones, 123 J St., Washington,		Mortgage on rental property, Delaware Promissory note	1991 1999 -	8%	25 yrs. on demand	l—		- <u>x</u> -					<b> </b>			<b>-</b> -
1	DC	Trouissory note	1999	10 76	on demand	╂─				X					<del>                                     </del>	$\vdash$
						<u></u>										
2																
3																
4																
5								-								
* This category applies only if the liability with the spouse or dependent children, ma	is solely that of the file rk the other higher cate	er's spouse or dependent children. If the liability is that of egories, as appropriate.	the filer or a	joint liabi	lity of the fi	ler										
Part II: Agreements or Ar	rangements														-	

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
E	xample:	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				
2				
3				
4				
5				
6				

rior Editions Cannot Be Used.

of per telephon commonto

'rior Editions Cannot Be Used.