SF278 (Rev. 03/2000)

5	C.F.R	Part	2634	-

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

U.S. Offse of Government Ethics								
Date of Appointment, Candidacy, Election	Reporting Status	Incumbont	Calendar Year	i Now Ente	ant, Nominee,	Termination	Termination Date (If Appli- cable) (Month, Day, Year)	Fee for Late Filing Any individual who is required to
or Nomination (Month, Day, Year)	appropriate boxes)	Incumbent	Covered by Report	or Candid	· · · ·	Filer		file this report and does so more than
	uppropriate boxes)	í Lui	2008		aic	1101		30 days after the date the report is
	Last Name			First Nan	ne and Middle I	nitial		required to be filed, or, if an extension
Reporting Individual's Name	Reynolds			Elizabe	th C			is granted, more than 30 days after the
								last day of the filing extension period
Position for Which Filing	Title of Position				ent or Agency ()			shall be subject to a \$200 fee.
rosition for which rung	Director of Med	lia Affairs		Executi	ve Office of t	he President		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		Λ 1	/		(23)	(مر (بل	/	the preceding calendar year except
(or forwarding address)	1607	Pennsill	Vanja K	re NIA	\mathcal{O}	954	-1414	Part II of Schedule C and Part I of Schedule D where you must also
Position(s) Held with the Federal	Title of Position(s)				<u> </u>			include the filing year up to the date
Government During the Preceding								you file. Part II of Schedule D is not
12 Months (If Not Same as Above)				ŧ				applicable.
								Termination Filers: The reporting
Presidential Nominees Subject to	Name of Congress	ional Committee Co	onsidering Nomination	Do You I	ntend to Create	a Qualified Diversit	ied Trust?	period begins at the end of the period
Senate Confirmation								covered by your previous filing and ends
					Yes	No		at the date of termination. Part II
Certification	Signature of Repor	ting Individual				Date (Month, Day,	YPAT 1	of Schedule D is not applicable.
I CERTIFY that the statements I have						But (monin, Buy,	<u></u>	Nominees, New Entrants and
made on this form and all attached	11100	DANA)		1	3-110-	199	Candidates for President and Vice
schedules are true, complete and correct to the best of my knowledge.	1 Leg	nale			1	510	\bigcirc	President:
	V							Schedule A _ The reporting period for
	Signature of Other	Reviewer				Date (Month. Dav.	Year)	income (BLOCK C) is the preceding calendar year and the current calendar
Other Review	1		1.1	7	1	,	/	year up to the date of filing. Value
(If desired by	IAAA	March	1110		í	2/16	109	assets as of any date you choose that is
agency)	1 0000	VEVE	$\gamma \sim \zeta$			///0		within 31 days of the date of filing.
Agency Ethics Official's Opinion	Signature of Desig	nated Agency Ethic	Official/Reviewing O	fficial		Date (Month. Day.	Year)	Schedule B-Not applicable
On the basis of information contained in this report. I conclude that the filer is		\sim	7					
in compliance with applicable laws and		$-\lambda$. C_{∇}			[3/18/09		Schedule C. Part I (Liabilities)-
regulations (subject to any comments	199-				[5/10/09	1	calendar year and the current calendar
in the box below).	Signature				+	Date (Month Day	Vage)	year up to any date you choose that is within 31 days of the date of filing.
Office of Government Ethics	orgnuture							While of days of the date of thing.
Use Only								Schedule C Part II (Agreements or
Comments of Reviewing Officials (If addit	ional space is requir	ed use the reverse	side of this sheet)					Arrangements) – Show any agreements or arrangements as of the date of
		<u>, a. and ma rererac</u> .				ndicate number of d		filing.
								Schedule DThe reporting period is the preceding two calendar years and
								the current calendar year up to the
								date of filing,
								Agency Use Only
l l								OGE Use Only
				(Check	t box if commen	ts are continued on	the reverse side) 📃	

5 C.F.R Part 2634 U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A Assets and Income Valuation of Assets **Income:** type and amount. If "None (or less than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLOCK B BLOCK A BLOCK C For you, your spouse, and dependent children, Type Amount 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 report- \mathcal{X} Ξ. ing period, or which generated more than \$200 Date 法 Other 3 Excepted Investment Fund None (or less than \$1,001) \$25,000,001 2 \$50,000,000 in income during the reporting period, together Income (Mo., Day, \$5,000,001 - \$25,000,000 \$1,000,001 - \$ 5,000,000 á, None (or less than \$201) with such income. \$1,000,001 - \$5,000,000 Yr.) (Specify 1.4 \$500,001 - \$1,000,000 \$100,001 - \$1,000,000 Type & \$100,001 - \$250,000 \$250,001 - \$500,000 **Rent and Royalties** \$50,001 - \$100,000 Over \$1,000,000 * For yourself, also report the source and actual Actual Only if \$50,001 - \$100,000 Over \$50,000,000 \$15,001 - \$50,000 \$15,001 - \$50,000 Over \$1,000,000* **S1,001 - S15,000** amount of earned income exceeding \$200 (other **Excepted Trust** Qualified Trust Over \$5,000,000 Honoraria \$5,001 - \$15,000 Amount) \$2,501 - \$5,000 **Capital Gains** \$1,001 - \$2,500 than from the U.S. Government). For your spouse, \$201 - \$1,000 report the source but not the amount of earned Dividends income of more than \$1,000 (except report the Interest actual acount of any honoraria over \$200 of your spouse). None 14 Central Airlines Common : 4 х 599 $\hat{x}_{0}^{\bar{n}}$ х Examples Doe Jones & Smith, Hometown, State ŝ. x 1.1 re. aw Partnership Income \$130.00 Kempstone Equity Fund 10 X x х x IRA: Heartland 500 Index Fund x $|a\rangle$ 22 х USAA Savings Bank, Savings Account х 10 х х Ť 2 11 Ć., Obama for America Salary: \$39,604 3 Campaign to Defend America Salary: \$39,136 4 States and 1 John Edwards for President Salary: \$4719 ないなかの 記録の Sec. 1 185 Contraction of the local data a to Presidential Inaugural Committee Sec. 1 Salary: \$1666 5 200 - 155 - 4 United Bank (Distribution of Fund from (Distribution: \$ 4121 00 avinutinother) (\cdot)

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, rk the other higher categories of value, as appropriate.

Prior Editions Cannot be Used.

SF278 (Rev. 03/2000)

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

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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 Source (Name and Address) Examples: Nat'l Assn. of Rock Collectors, NY, NY Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) \$		Page Number Page Number								Reporting Individual's Name											
or dependent children during the reporting period of any real personal residence, or a transaction solely between you, property, stock, bonds, commodity futures, and other securities when the amount of the transaction exceeded divestiture" block to indicate sales made pursuant to a structure to the transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture" block to indicate sales made pursuant to a structure transaction exceeded divestiture transactiture divest received from one source could divest transaction exceeded divestiture transaction exceeded divestiture transaction exceeded divest divest transaction exceeded divest divest transaction exceeded divest dincerta divest exceeded divest divest							None											Part I: Transactions			
property, stocks, bonds, commodity futures, and other vour spouse, or dependent child. Check the "Certificate of divestiture" flow OGE. Date (Ma., Day, Yr)				x)	saction	f Trans	nount c	An						I I							
Example: Central Airlines Common x 2/1/99 x x 2/1/99 x x y y x y y x y y x y y x y y x y y x y y x y y x y <thy< th=""> y <thy< th=""> y</thy<></thy<>	\$50,000,000 Certificate of divestiture	,000,000	000'000	- 100,000	er 000,000*	0,001 - 000,000	0,001 - 0,000	0,001 - 0,000	0,000	,001 - 1,000	001 - 5,000			<u> </u>	T		her your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a	property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded			
1 NOT REQUIRED FOR NOMINEES 2	\$50 Cen dive	\$50 0ve	\$25	÷ 53	\$1, \$1,	\$50 \$1,	\$25 \$50	\$10 \$25	\$50 \$10	\$15 \$50	\$1. \$15			Sa			Identification of Assets				
2 3 3 4 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 demendent children, report the source, a brief description, and the value of: (1) eiths (such as taneible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$260; For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal firiend, agency approval under 5 U.S.C. & 4111 or other statutory authority, etc. For travel-related eash rembursements, include travel litnerary. the U.S. Government: given to your agency in connection with official travel: received from nes source, totaling more than \$260; For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal firiend, agency approval under 5 U.S.C. & 4111 or other statutory authority, etc. For travel-related eash rembursements, include travel litnerary. the donor's residence. Also, for purposes of ageregating gifts to determine the total value from one source, exclude items worth \$104 or less. See instructions. None Source (Name and Address) Brief Description Vi Examples [NaT1Ass., of Rock Collectors, NY, NY Airline ticket, hotel room & meals incident to pational conference 6/15/99 (personal activity unrelated to duty) Soure (Name and Address)									x			1/99				<u>x</u>					
3											1			ĺ	í		<u> </u>	NOT REQUIRED FOR NOW			
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 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. For conflicts analysis, it is helpful to indicate a basis for receipt, such tas personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related eifts and reimbursements, include travel itinerary, dates and the nature of expenses provided Exclude anything eiven to you by Integer the sponse of the sponse of the sponse of the statutory authority, etc. For travel-related eifts and reimbursements, include travel itinerary. None Source (Name ond Address) Brief Description Vi Survel (Name ond Address) Airline ticket, horel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Si	_		-					-					+	-	+			2			
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Examples: Nat'l Assn. of Rock Collectors, NY, NY Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)		ns	lly lity at ne the uction	ld tota ospita termi	ent chi sonal l ts to d	pende s pers ng gift	or de ded a egatii	pouse provi f aggr	our si ou: or ses of	d by y o to ye purpo	eceive onshi o, for	ives; re r relati ce. Als e sourc	related of the siden om o	d from ndent or's re lue fre	eive lepe dor al va	rece ind the tota	Part II: Gifts, Reimbursements, and Travel Expenses For you, your spouse and dependent children, report the source, a brief descrip- tion, 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,				
	alue	V											ion	Descrip	Brief	E		Source (Name and Address)			
Frank Jones, San Francisco, CA Leather briefcase (personal friend)	500 300		ollectors, NY, NY Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)							Examples: Nat'l Assn. of Rock Collectors, 1 Frank Jones, San Francisco, CA											
1 none											none										
3																					
4																	t				
5 Prior Editions Cannot Be Used																					

SF 278 (Rev. 5 C.F.R Part 2 U.S. Office of			1														
Reporting Individual's Name SCHEDULE C											Page N						
Part I: Liabilities Report liabilities over \$10,000 owed to any one creditor at personal residence unless it is rented out; loans secured None																	
any time during the reporting period by you, your spouse.								or Val									
or depende	ent children. Check the highest reporting period. Exclude a m	amount owed	liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	Date	Interest	Term i	f .	\$15,000 \$15,001 - \$50,000				· 8	8	- 8	- 10	001-	00
during the	reporting beriou. Exclude a m	longage on your		Incurred	Rate	appli- cable	\$10,001 \$15,000		0,00,0	0,00,0	0,001	0,000	Over \$1,000,000*	\$1,000,001 \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 \$50,000,000	Over \$50,000,0
	Creditors (Name and Address) Type of Liability			1				\$15 \$50	\$50 \$10	\$10	\$25 \$50	\$50	Over \$1,00	\$1,0 \$5,0	\$25	\$25 \$50	0ve \$50
Examples:	First District Bank, Washington John Jones, 123 J St., Washingt		Mortgage on rental property, Delaware Promissory note	<u>- 1991</u> 1999	8%	25 yrs on dema			<u> </u>	+	$-\frac{1}{x}$		<u> </u>			┝	+
1				1		1											
USAA 2	Savings Bank Standard Vi	sa	Credit Card	2008	13.9%	revolvi		×								'	
							_										
3																	
4																	
5					 				<u> </u>							'	
5																	
	gory applies only if the liability pouse or dependent children, m		ler's spouse or dependent children. If the liability is that of the tegories, as appropriate.	filer or a j	oint liabilit	ty of the f	iler										
Part I	I: Agreements or A	rrangements															
Report yo	our agreements or arrangeme	ents for: continuing			ce; and (4								ling ti	he rep	ortin	g	
	benefit plan (e.g. 401k, de by a former employer (inclu			of negot	iations fo	r any of	these ar	ranger	nents	or be	nefits					/	
Jayment	by a former employer (men	iding severance pays	inclus, (5) leaves									ľ	lone	X	₩v		
Status and Terms of any Agreement or Arrangement						Parties Doe Jones & Smith, Hometown, State											ate
Example:	Pursuant to partnership agreer calculated on service performed		im payment of capital account & partnership share			ſ	Doe Jones	& Smit	h, Hon	netown,	State					7/	/85
1																	
2																	
4																	
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or Editions Cannot Be Used.

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U.S. Office of Government Ethics

Reporting Individual's Name

SCHEDULE D

Page Number

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.

director, trustee, general partner, proprietor, representative, employee, or	initian Exclude nositions with religious nose solely of an honorary nature.	None	in in	
Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples: Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	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	Legal services
Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
1	
Campaign to Defend America/Progressive Media USA, Washington DC	Employed as deputy campaign manager for research and message
2 Obama for America, Chicago IL	Rapid Response Director
3	
4	
5	
6	