
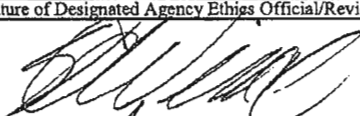
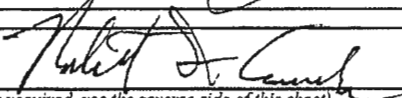


Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	Reporting Status (Check appropriate boxes) <input type="checkbox"/> Incumbent	Calendar Year Covered by Report	New Entrant, Nominee, or Candidate <input checked="" type="checkbox"/>	Termination <input type="checkbox"/> Filer	Termination Date (If Applicable) (Month, Day, Year)	Fee for Late Filing 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		Reporting Periods Incumbents: 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					Termination Filers: 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			
Certification		Signature of Reporting Individual			Date (Month, Day, Year)		
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		Nominees, New Entrants and Candidates for President and Vice President: Schedule A --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.
Other Review (If desired by agency)		Signature of Other Reviewer			Date (Month, Day, Year)		
Agency Ethics Official's Opinion		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		Schedule B --Not applicable. Schedule C, Part I (Liabilities) --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.
Office of Government Ethics Use Only		Signature			Date (Month, Day, Year)		
					3/24/09		Schedule C, Part II (Agreements or Arrangements) -- Show any agreements or arrangements as of the date of filing. Schedule D --The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.
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"/>							
						Agency Use Only MAR 17 2009 OGE Use Only MAR 20 2009	

Reporting Individual's Name
 Charles P. Rose

SCHEDULE A

BLOCK A	BLOCK B										BLOCK C		Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria																		
	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.																					
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. For yourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spouse, report the source but not the amount of earned income of more than \$1,000 (except report the actual amount of any honoraria over \$200 of your spouse). 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	\$500,001 - \$1,000,000	Over \$1,000,000 *	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	Over \$25,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gain	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*	\$1,000,001 - \$5,000,000	Over \$5,000,000			
	<i>Examples</i>					X									X						X											
1 Franczek Radelet & Rose, P.C. Shareholder in law firm Chicago, IL				X																												Salary \$493,086.00
2 Banc of America Investment Services - American Europacific Growth Mutual Fd Trade Symbol AEPGX		X											X																			
3 Banc of America Investment Services - AT&T Inc Com Trade Symbol T			X											X							X											
4 Banc of America Investment Services - Powershares Bldrs Index FDS TR Asia 50 ADR Trade Symbol ADRA	X																		X													
5 Banc of America Investment Services - Bunge Limited Com Trade Symbol BG			X											X					X													
6 Banc of America Investment Services - Chevron Corp New Trade Symbol CVX	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		Date (Mo., Day, Yr.)	Only if Honoraria				
	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 \$500,000 *	Over \$1,000,000	Over \$25,000,000			Over \$50,000,000	Dividends	Interest	Other Income (Specify Type & Actual Amount)
1		X										X	X			
2		X											X			
3		X										X	X			
4		X											X			
5		X										X				
6		X										X	X			
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)

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			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

Page Number
 5

(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 *	None (or less than \$201)	Dividends	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
1	Janus Janus Money Market Trade Symbol JAMXX				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											
8	Fidelity Investments - Profit Sharing Pln FID Cap Appreciation Trade Symbol FDCAX			X					X			X												
9	Fidelity Investments - Profit Sharing Pln Spartan US EQ Index Trade Symbol FUSEX				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 Assets and Income	BLOCK B Valuation of Assets at close of reporting period								BLOCK C 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)	Amount									Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria			
										Over \$1,000,000	Over \$50,000,000	Over \$25,000,000	Over \$10,000,000	Over \$5,000,000	Over \$1,000,000	Over \$500,000	Over \$100,000	Over \$10,000			Over \$1,000	Over \$201	
									Type														
None <input type="checkbox"/>										Dividends													
1 Fidelity Investments - Profit Sharing Pln Rainier Sm/Mid Cap Trade Symbol RIMSX		X							X	Interest													
2 Fidelity Investments - Profit Sharing Pln FID Diversified Intl Trade Symbol FDIVX				X					X	Dividends													
3 Fidelity Investments - Profit Sharing Pln FID Freedom 2020 Trade Symbol FFDX				X					X	Dividends													
4 Franczek Radelet & Rose, P.C. Defined Benefit Plan					X																Monthly pension of \$8,050 upon age 65		
5 BucI, Inc. dba City Olive Olive oil store owned by spouse Chicago, IL																					Salary		
6 BucI, Inc. dba City Olive Olive oil store owned by spouse Chicago, IL																					S-Corp Gross Income \$259,750		
7 Exxon Mobil Corp Trade Symbol XOM		X							X	Dividends													
8 Chase - Cash			X						X	None (or less than \$201)													
9 North Community Bank - Cash		X							X	None (or less than \$201)													

* 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 child/ren 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.																														
											Type	Amount									Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria																			
										Dividends	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																					
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	\$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	Dividends	Reimbursements/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			
1												X																													
											X																														
2											X																														
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8																																									
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* 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 Charles P. Rose	SCHEDULE B	Page Number 8
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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			
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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

SCHEDULE B continued
 (Use only if needed)

Page Number
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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*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$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 Charles P. Rose	SCHEDULE C	Page Number 10
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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.

None

Category of Amount or Value (x)

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

None

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 Charles P. Rose	SCHEDULE D	Page Number 11
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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	SCHEDULE D	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

Prior Editions Cannot Be Used.

Reporting Individual's Name Charles P. Rose	SCHEDULE D	Page Number 13
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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		