SF278 (Rev. 03/2000)

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved:

5 C.F.R Part 2634 OMB No. 3209-0001 U.S. Office of Government Ethics Fee for Late Filing Date of Appointment, Candidacy, Election Reporting Status Calendar Year Termination Date (If Applicable) (Month, Day, Year) Incumbent Covered by Report New Entrant, Nominee. Termination Any individual who is required to r Nomination (Month, Day, Year) Check or Candidate Piler file this report and does so more than appropriate boxes) 30 days after the date the report is First Name and Middle Initial required to be filed, or, if an extension Last Name Reporting Individual's Name is granted, more than 30 days after the Thomas E. Perez 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 Assistant Attorney General, Civil Rights Division Department of Justice Reporting Periods Address (Number, Street, City, State, and ZIP Code) Telephone No. (Include Area Code) Incumbents: The reporting period is the preceding calendar year except Location of Present Office 410-230-6020 500 North Caivert Street, Baltimore, MD 21202 Part II of Schedule C and Part I of (or forwarding address) Schedule D where you must also Position(s) Held with the Federal include the filing year up to the date Title of Position(s) and Date(s) Held Government During the Preceding you file. Part II of Schedule D is not 12 Months (If Not Same as Above) applicable. Termination Filers: The reporting Do You Intend to Create a Qualified Diversified Trust? Presidential Nominees Subject to Name of Congressional Committee Considering Nomination period begins at the end of the period Senate Confirmation covered by your previous filing and ends Judiciary Х Yes at the date of termination. Part II of Schedule D is not applicable. Date (Month, Day, Year Certification Signature of Reporting Individual CERTIFY that the statements I have Nominees, New Entrants and made on this form and all attached Candidates for President and Vice schedules are true, complete and correct President: to the best of my knowledge. Schedule A-The reporting period for income (BLOCK C) is the preceding Signature of Other Reviewer Date (Month, Day calendar year and the current calendar Other Review year up to the date of filing. Value (If desired by assets as of any date you choose that is within 31 days of the date of filing. agency) Agency Ethics Official's Opinion Signature of Designated Agency Ethics Official/Reviewing Official Date (Month, Day) Schedule B-Not applicable. On the basis of information contained in this report. I conclude that the filer is Schedule C. Part I (Liabilities)in compliance with applicable laws and The reporting period is the preceding regulations (subject to any comments in the box below). calendar year and the current calendar year up to any date you choose that is Signature within 31 days of the date of filing. Office of Government Ethics Use Only Schedule C. Part II (Agreements or Arrangements) - Show any agreements Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheer or arrangements as of the date of filing. (Check box if filing extension granted & indicate number of days Schedule D-The reporting period is the preceding two calendar years and the current calendar year up to the date of filing. Agency Use Only

(Check box if comments are continued on the reverse side)

OGE Use Only

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Reporting Individual's Name Perez, Thomas E.		25.	44.91								S	CI	Æ	DU	J I L]	E A	4	,											Page Number 02 of 1	10
Assets and Income			7		porti	lose	of eriod													amo ed in		ock (for				n \$2	01)"	is checked, no	
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 spreport 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).	ont-) (100) Street sale	\$1,001 - \$15,000	\$15,081 - \$50,000	\$50,001 - \$100,000	\$250,001 - \$500,000	9		\$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		Rent and Royalites			None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,800 ee not ete non	A	mou	000	Over \$1,000,000*	\$1,000,001 - \$3,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
Examples Central Airlines Common Doe Jones & Smith, Hometown, State Kempstone Equity Fund IRA: Heartland 500 Index Fund			*	×								x			<u>×</u>		-				x						7 -		Law Partnership Income \$130,000	
Stephenson National Bank (Stock) Marinette, Wisconsin				×																									\$ Corp Income \$13,239.00	
2 Stephenson National Bank (Stock) S Marinette, Wisconsin				x																									\$ Corp Income \$13,080.00	
3 Stephenson National Bank (Stock) DC Marinette, Wisconsin			x																		2								S Corp Income \$7,167.00	
Stephenson National Bank (Stock) Marinette, Wisconsin			×																										\$ Corp Income \$7,167.00	
5 Stephenson National Bank (Stock) DC Marinette, Wisconsin			x												-														S Corp Income \$7,167.00	
6 American Funds Fundamental Investors CL F1		×										х							×											
 This category applies only if the asset/incommark the other higher categories of value, as an 			t of th	ne fil	ler's sp	oouse	or d	epen	dent	chil	dren	. If	the a	esset	/incc	me	is eit	her	that	of the	e fil	er or	oint	y hel	d by	the f	iler v	ith th	ie spouse or depende	ent children,

Rep	rez, Thomas E.						14.				S	CE	100		J L onl				tin	ue	d.					:				-		Pag	ge Number 03 (of 10	0
	Assets and Income					a repo	t clo	of ose o	of riod										e: ty							r th	at it		than	\$20	01)"	is c	checked, no		
	None	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	θ		1,000		81,000,001 - \$ 5,000,000	55,000,001 - \$25,000,000	\$25,000,001 \$50,000,000	Over \$50,000,000	Excepted tovestment Fund	Excepted Trust	Qualified Trust	Dividends	Rent and Royalties		Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	A	mo	unt	\$100,001 - \$1,000,500	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000		Other Income (Specify Type & Actual Amount)		Date (Mo., Dav, Yr.) Only if Honoraria
1	Heartiand Value Plus		x											χ							х														
2	Janus Fund		×											x							×														•
3	Janus Worldwide		·x											x							×														
4	Janus Mid Cap Value Invst Shs		×											×					·		x														
5	Janus Research Fund		х											x							x											Γ		1	
6	Thornburg Intl Value CL A		×											×							×														· · ·
7	Fidelity US Bond Fund		x											×							×														
8	Fidelity Govt Income Fund		х											x							x														
9	Fidelity Municipal Money Market Fund		x											×							×														
	This category applies only if the asset/income is rk the other higher categories of value, as approp			at of	fthe	filer	's sp	ouse	or	iepe	nden	t ch	ildre	n. I	f the	ass	et/ir	com	e is	ithe	r th	t of	the f	iler	or jo	intly	hel	d by	the	filer	with	the	spouse or de	pend	dent children

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	porting Individual's Name erez, Thomas E.	: :.								-	SC				LI	-		٤.		ue	d	· ·	- 79	* %			the state of					Pa	ge Number 04 of	10	ŀ
	Assets and Income					at epo	clo rting	of A se of g per		ets															"No C fo	r tha	it ite			\$20	01)"	is	checked, no		
_	DDOOR.			*****	1		1	I	18		1888	***		***	188	*		m	<u> </u>	1	.—							_				_		Т	
	None	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 - \$1,500,000	Over \$1,000.000 *	\$1.000,001 a. \$.5,044,040	55,000,001 - \$25,000,000	mormings - thromoses	Over \$50,000,000	Excepted investment band	Excepted Trust	Qualified Trust		Rent and Royalties		Capital Gains	None (or less than \$201)	\$261 - \$1,060	\$1,001 - \$2,500	\$2,501 - \$5,009		mo narioce indicis		\$100,001 - \$1,000,000	Over \$1,009,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000		Other Income (Specify Type & Actual Amount)		Date (Mo., Day, Yr.) Only if Honoraria
1	Aim Real Estate Fund		x											x							х														
2	Accessor Growth Allocation C Class		x											x							×		0000000												
3	Oppenheimer Quest Balanced Fund Class B		x											х							x								-						_
4	TIAA Traditional Annuity			×																	×		000000000000000000000000000000000000000												
5	CREF Variable Annuity: Stock Fund		×											x							x		000000000000000000000000000000000000000												
6	CREF Variable Annuity: Money Market Fund		×											X							x			·											
7	CREF Variable Annuity: Social Choice		x											×							×														
8	CREF Variable Annuity: Global Equities		×											×							×													-	
9	TIAA Traditional Annuity			×																	x														
	This category applies only if the asset/income is			at of	the	filer	s sp	ouse	or de	pen	dent	chil	dren	ı. If	the	asse	t/inc	omo	e is e	ithe	r tha	at of	the i	iler	or jo	intly	helo	d by	the	filer	with	n the	e spouse or dep	nde	ent children,

Rep	porting Individual's Name	100	- 1	4.0	1	7,53	···				S	CF	TE)	DΙ	JLE	A	CO	nti	ทบ	ed					-7					٠.	1	Page Number	Of 1	0
Pe	rez, Thomas E.					77.0		٠.		;	~	· -,-			only																	US	OTT	0
	Assets and Income		•	,		at epor	clo rting	of A	f					:										(C)	for t	hat			n \$	201	1)" i	is checked, no)	
\vdash	BLOCK A ·			***		<u>в</u>	SLOC	CK B				 [\dashv			\vdash	T	ype						BI	OCK Am	iour	ıt						_	
	None	None (or less than \$15,001)	\$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 Ouglifted Trust	Dividends	Royalties		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	0	000	Over \$1,000,000*	61 000 001 85 000	ORDINATE - TOTALITE	Over \$5,000,000	Other Income (Specify Type & Actual Amount)		Date (Mo., Day, Yr.) Only if Honoraria
1	TIAA Variable Annuity: Real Estate			×										х						×											witering			
2	CREF Variable Annuity: Stock Fund			×	-								·	×						x														
3	CREF Variable Annuity: Bond Market			x										x						×														
4 DC	College Savings Plan of Maryland T. Rowe Price Portfolio 2015			×										×						x														
5 DC	College Savings Plan of Maryland T. Rowe Price Portfolio 2015			x										×						×														
6 DC	College Savings Plan of Maryland T. Rowe Price Portfolio 2021			×										×						×		-												
7	Kaiser Commission on Medicaid and the Uninsured																															Honoraria \$2000		03/08 06/08
8	M & T Bank (savings)		x															300000000000000000000000000000000000000		×														
	Maryland Dept of Labor, Licensing and Regulation Baltimore, MD														-																	Salary \$139,004	. [
	This category applies only if the asset/incom			at of	the	filer's	s spi	ouse	or d	eper	nden	t ch	ildre	n. I	f the as	set/i	ncor	ne is	eith	er th	at o	f the	file	ror	oint	ly he	ld b	y the	file	er w	vith	the spouse or d	lepen	dent children

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Reportin	og Individual's Name	:									SC			DU						uec	I										Page Number 06 of 1	0	
P 6162,	Thomas E.												(Us	se o	nly	/ if	nee	de	d)				· 							_1			
	Assets and Income					at repo	t clo	se of g per	riod	ets														C fo		at ite		han S	<u></u> \$20	1)" i	is checked, no		
	DEACKA						3200						**					Тур	e						_	ount			_				\neg
	None	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 *	\$1,606,001 \$ 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	Dividends	Rent and Royalties	Interest	None (called the \$201)		\$1,001 - \$2,500	\$2,501-85,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 \$1,000,000	Over \$1,000,000*	\$1,600,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., L Yr.) Only Honor	Day,) v if
1	uropacific Growth Fund A		x		-								_	×					1	,	(~	
2 T.	Rowe Price 2025 Retirement Fund		х										-	×						,	ζ.			-									
He	eorge Washington School of Public												000000000000000000000000000000000000000																		Salary \$12, 375		
	ommunity Catalysts, Inc. oston, MA																														Honorarium \$3625	03/0)8
5 S Ha	artford Capital Appreciation Fd A		х											x						,	(33333									
Le	ashington gal Clinic for the Homeless ashington, DC												8 (68)66536666666											20000000							Spouse salary		
7																																	
8																								000000000000000000000000000000000000000							1		
9													000000000000000000000000000000000000000											000000000000000000000000000000000000000								-	
	s category applies only if the asset/income is			at of	the	filer	's sp	ouse	or de	pen	dent	chil	ldrer	ı. If	the a	asse	t/inc	ome	is e	ither	that	of the	filer	or jo	ointly	y held	l by t	the fi	ler v	with t	the spouse or deper	dent chil	ldren,

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

and the same of th	rt I: Transactions rt any purchase, sale, or exchange by you, your spouse, pendent children during the reporting period of any real personal residence, or a transaction solely between you, Transaction Transaction Type (x) Amount of Transaction (x)																		
Perez, Thomas E.			SCHEDULE B											ige 14 (07 Of	10		
Part I: Transactions	4							None	. [
						- 1		1	**********		Am	ount of."	Transac	tion (x)				7
property, stocks, bonds, commodity securities when the amount of the tr	futures, and other ansaction exceeded ulted in a loss. Do not	divestiture" block to indicate sales made certificate of divestiture from OGE.		urchase	Sale	Sxchange		1,001 -	15,001 - 50,000	50,001 -	100,001 -	250,001 - 500,000 500,001 -	1,000,000	1,000,000*	5,000,000	25,000,000	50,000,000 Ver	\$50,000,000 Certificate of	ivestiture
Example: Central Airlines Commi		uion of Assets.	The second of th				2/1/00	69 69	69 69		69 69	69 69 69	9 69 C	€> €	<i>₽</i> 6 9	67 69	· 64 O	⊕ C	- 0
1				^			2/1/33												
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3								170			1				2 2 2		1.		
4		•									i			7.			7		٦
5										1.4								•	
* This category applies only if the u	nderlying asset is solely that	of the filer's spouse or dependent childre	en. If the underlying asse	is eit	her hel	ld	***												_
by the filer or jointly held by the file	r with the spouse or depende	nt children, use the other higher categor	ries of value, as appropria	e.															
For you, your spouse and depention, and the value of: (1) gifts (food, or entertainment) received (2) travel-related cash reimburse than \$260. For conflicts analysis as personal friend, agency approauthority, etc. For travel-related dates, and the nature of expense	dent children, report the second as tangible items, traffrom one source totaling ements received from ones, it is helpful to indicate aval under 5 U.S.C. § 411 gifts and reimbursements is provided. Exclude anyther second as provided.	ource, a brief descrip- unsportation, lodging, more than \$260; and source totaling more burses for receipt, such I or other statutory include trayel timerary.	vita esta espera	received independent independe	ved from the conders on or's value her ex	om resi resi fron xclus	elatives; related their related dence. Also one sour sions.	eceive ionshi	d by y p to yo purpo	our spour or ses of	pouse provi faggr	or dep ded as egating	person gifts	nt chi nal h to de	ld tota iospita etermi	lly lity at ne the uction	ns ne E		
													e be E			-			
Frank Jones, San Franc			t to national conference 6/15	<u>(99 (pe</u>	rsonal	activi	ty unrelated	to duty											
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Della Della a Commando III and							,											_	_

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Reporting Individual's Name
Perez, Thomas E.

Reporting Individual's Name											Page Nu	mber		
Perez, Thomas E.	SCHEDUI	LE C										08.0	of 10	
Part I: Liabilities	,, ,, ,, ,, , , , , , , , , , , , , , 		·								•			
Report liabilities over \$10,000 owed to any one credi any time during the reporting period by you, your sp			No	ne x	1			Catego	ory of A	mount (or Valu	e (x)	· .	
or dependent children. Check the highest amount ow during the reporting period. Exclude a mortgage on	ved liabilities owed to certain relatives listed in instructions.	Date	Interest	Term if	Į.,	- 0	. g	90	- 20	000	•000	900 -	0000	\$50,000,000 Over \$50,000,000
		Incurred	Rate	appli- cable	\$10,001	\$15,001 -	00,00	20,00	\$250,001	\$500,001 - \$1,000,000	Over \$1,000,000	\$1,000,001 \$5,000,000 \$5,000,001	\$25,000,000	\$50,000,000 Over \$50,000,000
Creditors (Name and Address) Examples: First District Bank, Washington, DC John Jones, 123 J St., Washington, DC	Type of Liability Mortgage on rental property, Delaware Promissory note	1991	8%	25 yrs.	1	₩ ₩.	ж х	\$ 53	1/4	\$ 5	<u> </u>	5 6 6	**	\$ 6 8
1 John Jones, 125 J St., Washington, DC	Fromssory note	. 1999	10 76	on deman	1				X				_	
2		+		[1							+		
3					+								+	
4					\dagger									
5					1				p# 1		-			
	and of the filer's spouse or dependent children. If the liability is that of the	e filer or a j	oint liabilit	ty of the fil	er									
Part II: Agreements or Arrange	The state of the s		: -											
Report your agreements or arrangements for: comployee benefit plan (e.g. 401k, deferred comployee benefit plan	ontinuing participation in an			4) future of the						regard	ing th	e repoi	ting	<i></i>
payment by a former employer (including sever	rance payments); (3) leaves	or negot	iations to	i airy Or ti		carretor.	1101103	01 00	-	. N	one [7".		
Status and	Terms of any Agreement or Arrangement							Parties	\$ ~.			177		Date
Example: Pursuant to partnership agreement, will rec calculated on service performed through 1/	ceive lump sum payment of capital account & partnership share 700.			Do	e Jones	& Smit	h, Hom	etown,	State	. ,				7/85
Continued participation in the University Sys No further contributions will be made to the	· ·			U	niversit	y of M	arylar	nd						01/01
	and Defined Compensation Retirement Plan			Si	ate of	Maryla	ınd							01/07
3	-													
4														
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6									***					
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Perez, Thomas E.		SCHEDULE D		09 0	of 10
Perez, Inomas E.					
	A. T. C. C.		11	-	
Part I: Positions Held Outs					
Report any positions held during the ar	pplicable reporting period, whether	consultant of any corporation, firm, partner			100
director, trustee, general partner, propr	but are not limited to those of an officer,	non-profit organization or educational instances social, fraternal, or political entities and the	ose solely of an honorary nature.	5.	· ·
Albert .		and the second s		None	
Organi	ization (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		Law firm	Partner	7/85	1/00
1 Maryland Department of Labor,	Licensing & Regulation	State Government	State Cabinet Secretary	01/07	present
Baltimore, MD					
2 George Washington School of	Public Health	Non-profit education	Part-time professor	08/07	present
Washington, DC 3 Center for American Progress A	Action Fund	Think and action took	Board Member	07/04	procest
3 Center for American Progress A Washington, DC	Action Fund	Think and action tank	Board Wember	07/04	present
4 Action Aid USA		Non-profit NGO	Board Member	05/07	present
Washington, DC		Non-profit NGO	Board Member	05/07	present
5 Kaiser Commission on Medicai	d and the Uninsured	Non-profit	Commissioner	03/02	present
Washington, DC		, ton prom		00.02	product
6 University of Maryland School of	of Law	Non-profit education	Assistant professor	04/01	06/07
Baltimore, MD					
Part II: Compensation In F	excess Of \$5,000 Paid by One So	urce	,	Do not com	plete this part
Report sources of more than \$5,000 co		corporation, firm, partnership, or other bus	siness enterprise or any other non-profit		n Incumbent,
	ed directly by you during any one year of	organization when you directly provided th		Termination	
	names of clients and customers of any	of more than \$5,000. You need not report		Vice Presid	ential
				or Presiden	tial Candidate
	<u> </u>		The second second	None	
Source (Name and Address)			Brief Description of Duties		
Examples: Doe Jones & Smith, Hometown	n, State	Legal services			- (1971-1) -
Metro University (client of Do	e Jones & Smith), Moneytown, State	Legal services in connection with university of	construction		
Maryland Department of Labor, Baltimore, MD	, Licensing & Regulation	State Cabinet Secretary			
2 George Washington School of	Public Hoolth	Part-time professor			
Washington, DC	i ubile Health	. Partune professor			
3 University of Maryland School of	of Law	Assistant professor			
Baltimore, MD		, toolotory protocos			
4 The California Endowment		Consultant			VIII.
Woodland Hills, CA					
5					
				•	•
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Perez, Thomas E.		SCHEDULE D	*		· 10 of	10
compensated or not. Positions inclu	tside U.S. Government e applicable reporting period, whether ide but are not limited to those of an officer, apprietor, representative, employee, or	consultant of any corporation, firm, par non-profit organization or educational i social, fraternal, or political entities and	institution. Exclude po	sitions with religiou	y S. None	
Ore	ganization (Name and Address)	Type of Organization	Positi	on Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples: Nat'l Assn. of Rock Collect Doe Jones & Smith, Homet	ors, NY, NY	Non-profit education Law firm	President Partner		6/92 7/85	Present 1/00
1 The California Endowment Woodland Hills, CA		State Health Foundation	Consultant		01/01	01/07
3						
4	Lin garanting and a		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
5				, , , , , , , , , , , , , , , , , , ,		
8						
Report sources of more than \$5,000 business affiliation for services prov	Excess Of \$5,000 Paid by One So compensation received by you or your yided directly by you during any one year of the names of clients and customers of any	corporation, firm, partnership, or other organization when you directly provide of more than \$5,000. You need not rep	d the services generating	ng a fee or payment	if you are an Termination Vice Preside	Filer, or
Source (Name and Address Examples: Doe Jones & Smith, Homet Metro University (client of		Legal services Legal services in connection with university	Brief Description of	Duties		
1	200 solid & Ollini, Moneytown, Olido	Exga services in connection with university	ty voisa action			•
2						
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5				<u> </u>		
6					· · · · · · · · · · · · · · · · · · ·	