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Form Approved:

## 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 appropriate boxes)	Incumbent	Calendar Year Covered by Report	New Entrant, Nominee, X or Candidate	Termination Filer	Termination Date (If Appli- cable) (Month, Day, Tear)	Fee for Late Filing Any individual who is required to file this report and does so more than
	Last Name		1.	First Name and Middle	Initial		30 days after the date the report is required to be filed, or, if an extension
Reporting Individual's Name	Ogden	***************************************		David W.	ATTIO		is granted, more than 30 days after the
	Title of Position			Department or Agency	(If Applicable)		shall be subject to a \$200 fee.
Position for Which Filing	Deputy Attorne	y General		US Department of	Justice	•	Reporting Periods
	Address (Number.	Street City State.	and ZIP Code )		Telephone No. (In	clude Area Code)	Incumhents: The reporting period is
Location of Present Office (or forwarding address)	1875 Pennsylv	ania Avenue, N	IW Washington D	C 20006	(202) 663-600	0	the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also
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					include the filing year up to the date you file. Part II of Schedule D is not applicable.
		10 5				15 1 m0	Termination Filers: The reporting
Presidential Nominees Subject to Senate Confirmation	Senate Judicia		Considering Nomination	n Do You Intend to Crea	te a Quantied Divers		period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II
	ever te m						of Schedule D is not applicable.
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.	Signature of Repo	> W	. 0		Jawau	4 21, 2009	Nominees, New Entrants and Candidates for President and Vice President:
	Signature of Other	Reviewer	-		Date (Month, Day	Vocal	Schedule A. The reporting period for income (BLOCK C) is the preceding
Other Review (If desired by agency)	La	- M;	Rope		1	· 22, 2009	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.
Agency Ethics Official's Opinion	Signature of Design	nated Agency Ethi	cs Official/Reviewing	Official .	Date (Month. Day	Year)	Schedule B-Not applicable
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).		Jung	fluis		JAN.	22, 2009	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
	Signature	11			Date (Month Day	Year)	within 31 days of the date of filing.
Office of Government Ethics Use Only  Comments of Reviewing Officials (II addited)		/ Estat	H Cui	h	Jenney	27,2009	Arrangements)—Show any agreements or arrangements as of the date of
Lomments of Reviewing Officials III additi	ional space is realit	ea. use the reverse		box if filing extension granted d	& indicate number of	days)	filing.
							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
							ASSOCIATION COMMIT
	201			(Check box if comm	ents are continued o	n the reverse side)	JAN 2 2 2009

Reporting Individual's Name Ogden, David W.	SCHEDULE A	Page Number 2 of 13
Assets and Income	Valuation of Assets at close of reporting period BLOCK B  Income: type and amount. If "None (or less than \$201)". other entry is needed in Block C for that item.  BLOCK C	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 spouse, 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).	Type Amount  (1007)  (	Other Date Income (Mo., Dev. (Specify Yr.) Type & Actual Only If Amount) Honoraria
Central Airlines Common  Examples Doe Jones & Smith, Hometown, State  Kempstone Equity Fund  IRA: Heartland 500 Index Fund		1.av Partnership Income \$130,000
S Harbor Small Cap Value Fund	x x	
S Ivy Asset Strategy Fund	x x	
3 S Artisan Mid Cap Value Fund	x x x	
S Ivy Global Natural Resources		
5 S ING International Value Fund	x x	
S Nicholas Applegate Intnl Growth		
* This category applies only if the asset/income is mark the other higher categories of value, as appro	s 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 priate.	the spouse or dependent children,

SF278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government Ethics

Reporting Individual's Name Ogden, David W,	SCHEDULE A continued  (Use only if needed)  SCHEDULE A continued  3 of 1	13
Assets and Income BLOCK A	Valuation of Assets at close of other entry is needed in Block C for that item.  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.	
None	Nome (or less than \$1200)	Date (Mo., Day, Yr.) Only.if Honoraria
S Acadian Emerging Markets Fund		
J iShares S&P Midcap 400 Value Index	x x	
J iShares S&P Midcap 400 Growth Index	x x	
J iShares S&P 500 Value Index		
J iShares S&P 500 Growth Index		
J iShares MSCI EAFE Index		
J Fidelity Muni Money Market Fund (FTEXX)	x x	
Harbor Small Cap Value Fund		
9 CRM Mid Cap Value Fund  * This category applies only if the asset/income.	is solely that of the filer's spayse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spayse or dependent children.	

mark the other higher categories of value, as appropriate.

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U.S. Office of Government Ethics Reporting Individual's Name Ogden, David W.				-			<del></del>	."		SC				LE		10.50		ıue	ed	•										Page Number 4 of	13
Ogesii, Saile II.												(Us	e o	nly	if no	ede	ed)														
		.1			7							.17			T		77.77							-							
Assets and Income					a repo	t clo	of A se of g per	f	·:						In oth	er e	e: t	ype is n	and eed	am ed i	ount n Bl	ock	C fo	r th	at ite	ess t em.	han	\$20	)1) <sup>n</sup>	is checked, no	
BLOCK A	- 1	84	1888	31	D288888	BLO	CK B			 	2888 -			100000		<u></u>	· · · · ·	- 1				7.4.7	-	CK (	-	-			<del></del>		1
None		\$1.001 EST\$ 000	- 882	\$50,001 - \$100,000	\$1140,001 - \$250,000	\$250,001 - \$500,000		Over.S1,000.000 *	51,000,001 - 5.5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 \$30,000 BH	Over \$50,000,000	Lycepted threshnend fund	Excepted Trust Outlifted Trust	Dividends	Rent and Royalties	nterest ad	Capital Gams	None (or less than \$201)	\$201-\$1,000	\$1,001_\$2,500	2.401.54000			\$50,001 \$100,000	PCO	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over.\$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo. Day, Yr.) Only if Honoraria
Artisan Mid Cap Value Fund			*										×								С		D								
2 Ivy Global Natural Resources					X																										
Polaris Global Value Fund				x																											
Loomis Sayles Strategic Income													×									X									
5 ING International Value Fund					x																			×							
Acadian Emerging Markets Fund			A										x									x	an an an an an								
7 Loomis Sayles Global Bond Fund				×		area area area area area area area area				20000000													x		2000000						

C D

D

9 D2 American Funds Growth Fund

8 D2 American Funds Washington Mutual

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.

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Reporting Individual's Name	SCHEDULE A continued Page Number 5 of 13	
Ogden, David W.	(Use only if needed)	
Assets and Income	Valuation of Assets at close of other entry is needed in Block C for that item.  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	:
Nonc 1 D2 American Funds Income Fund	None (or less than \$15001   S1,001 - \$15,000	Date  Mo. Dav.  Yr.)  Only if  Honoraria
D2 American Funds EuroPacific Growth		
3 D1 American Funds Cash Mgmnt Trust (money market fund) 4 S Loomis Sayles Global Bond Fund		
5 J Dodge & Cox International Stock		
J Folaris Global Value Fund		
FM0 Facus Fund		
8 Pimco Total Relum Fund		
9 S Culumbia Value & Restructuring	Y D C	
* This category applies only if the asset/income is mark the other higher categories of value, as appro-	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.	dent childre

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Reporting Individual's Name	SCHEDULE A continued											Page Number 6 of 13									
Ogden, David W.							(Us	e only	if ne	eded	)	·									
												eren.						ta e era	71	<del></del>	2-78.0
Assets and Income		Va		of As	sets				Inc	ncome: type and amount. If "None (or less than \$20) ther entry is needed in Block C for that item.										" is checked, no	. 12.
SBLOCK A	reporting period BLOCK B									BLOCK C											¥
No. 10 Control of the										Туре			<b>***</b>		An	aount		l 🐼			
Visit																				Other	Date
					9	e #						(1)								Income (Specify	(Mo., Day, Yr.)
		e 8	B 8		\$1 000,000 S 5,000.0	\$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,00	0	Excepted Trust		\$911		an \$201)				00	Đ.		Over \$5,000,000	Type & Actual	Only if
	Nime (or first the \$1,001 - \$15,000	\$15,001 - \$50,000 \$50,001 - \$100,000	\$100,003 \$250,000 \$250,001 - \$500,000	Stiff (181 - \$1.000.00)	9	- \$2 #	000	Excepted Trust		H.	¥ III	None (or less than	500	ē,	\$5,001 - \$15,000 \$15,001 - \$40,000	\$50,001-\$100,000	S (100,400) S 1,400.00	Over \$1,000,000*	Over \$5,000,000	Amount)	Honoraria
	e (ur	100	# TOO!	100 tr	8	00,00	r \$50,	epted	Dividends	Regt and Bay Interest	apital Cains	or less	\$204 - \$1.000 \$1,001 - \$2,500	\$2,501 - \$4,000		10	∄	\$1,0(	0.53	<b>\$</b>	
	S1,0	\$15	\$25		9.13	\$5,0	Ŏ.	Exc	Divi	Ren		None (	\$1.00 \$1.00	Ħ.	\$5,0 \$1	\$50,0	8	Over	غ ا	; 5	
None																					Grand Company
WilmerHale Partners Capital			×							,	(					x					
S WilmerHale Partners Capital		х								,	(			X							
WilmerHale Defined Benefit Plan *values not readily ascertainable																		\$3	36, 🎎	entitled to a rollove tribution of approxir 60 upon separation	nately from firm
S WilmerHale Defined Benefit Plan *values not readily ascertainable																				entitled to lump su tribution of approxir \$9,000 at age 60	nately
D1 American Funds Income Fund of America																					
6 WilmerHale																				2008 Partnership Share: \$1,533,81	
7 S WilmerHale																				Partnership Share	
International Business Machines Corp	x											×									
WilmerHale																				estimate	
* This category applies only if the asset/income is mark the other higher categ	is solely t	hat of th	e filer's	spouse	or dep	endent	childr	en. If the	asset	/incom	e is ei	ther t	hat of	the file	er or jo	ointly h	ield l	by the	filer	with the spouse or de	ependent childre

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5 C.F.R Part 2634	

U.S. Office of Gov	remment Ethics
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eporting Individual's Name  Ogden, David W.	SCHEDULE A continued  (Use only if needed)											
	<u> </u>	(Use only if needed)										
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)" other entry is needed in Block C for that item.  BLOCK C	is checked, no									
		Type Amount										
Ngje	Street for less tham \$1,0013    S1,001 - \$15,000    S18,001 - \$15,000    S10,001 - \$10,000    S250,001 - \$500,000    S250,001 - \$500,000    S250,001 - \$500,000    S25,000,000 *     S25,000,000   \$1,000,000    S25,000,000 - \$25,000,000    S25,000,000 - \$25,000,000    S25,000,000 - \$25,000,000	Descripted Ameriment Finish	Other Date Income (Mo. Day. (Specify Yr.) Type & Actual Only if Amount) Honoraria									
J Municipal Bond: Seattle Washington Light and Power Due 04/2022		x										
J Municipal Bond: Dallas Texas Indep. School Dist. Due 02/2026		X X										
3 J Wachovia Checking Account		x x										
Bank of America Checking Account	x	x x										
J Wachovia Money Market Account		x x										
Bank of America Money Market Account	x	X .										
7 S ING Money Market Account	x	x x										
8 D Wachovia Student Checking Account	x	x x										
mark the other higher categ	; is solery mar or me rifer's spouse or dependent cr	hildren. If the asset/income is either that of the filer or jointly held by the file	with the spouse of dependent chif									

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

U.S. Office of Government Ethics		_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					A 1. 1. 1. 1.										
Reporting Individual's Name Ogden, David W.	45 G B 3	SCHEDULE	В		•						Pa	ige Numb	8 of	13				
Part I: Transaction	ns		7 35.00		direces.		Non	e							11 112			
Report any purchase, sale, or e or dependent children during the	xchange by you, your spouse,	report a transaction involving property used solely as your personal residence, or a transaction solely between you,		ransact						Amount	f Transac	tion (x)						
property, stocks, bonds, comms securities when the amount of \$1,000. Include transactions th	odity futures, and other the transaction exceeded at resulted 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	T	Exchange	Date (Mo., Day, Yr.)	\$1,001	515,001 -	50,001 100,000	250,000 2250,001 500,000	\$500,001 - \$1,000,000	\$1,000,000	55,000,000 55,000,000 525,000,000	50,000,000	\$50,000,000 Certificate of	Jactibure		
Example: Central Airlines C		ation of Assets	p.	, N	m	2/1/99	€ €	S 8	64 F4 F4	\$ 22 25	8 % 6	સ્ત્ર સ	5 5 5	7 5 C	ස	_ <del>:</del>		
1	Olimion Start and Committee of the Commi					2/1/99				AZ DALENDO El viento	87.	Principal Forces		4		_		
2		the state of the s			10 juli 1					7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1.4	Safe Lovery		2 E	F-217	_		
3											50.	1-13 1-23 1-33		5. 1.		_		
4			10000				A Contract a. Prin		THE SAME	## (1) # (1)	[h]	1974 4175	AJ ST garate		10,00	_		
*	·				Marij.					77	j			1				
5					14797 44-4							723						
For you, your spouse and d tion, and the value of: (1) g food, or entertainment) rece (2) travel-related cash reim than \$260. For conflicts an as personal friend, agency a authority, etc. For travel-re	mbursements, and T ependent children, report the ifts (such as tangible items, treived from one source totaling bursements received from one alysis, it is helpful to indicate approval under 5 U.S.C. § 411 lated gifts and reimbursements enses provided. Exclude any	source, a brief descrip- ansportation, lodging, more than \$260; and source totaling more, a basis for receipt, such II or other statutory s, include travel timerary.	receind the tota	eived epend donor I valu	from ent of r's res le from	rnment: gi relatives; f their rela idence, A m one sou isions,	receiv tionsh Iso. fo	ed by lip to v r purp	your spo you; or p oses of	ouse or dorovided	epender as perso ng gifts	nt child onal hos to dete	totally spitality a rmine the	ıt S		:		
	lame and Address)		В	rief De	scription	on			100			1.4	77.7		Value	i less		
Examples: Nat'l Assn. of Ro Frank Jones, San		Airline ticket, hotel room & meals incident to national conference 6  Leather briefcase (personal friend).	/1 <u>5/99</u> (	person	al activ	vity unrelated	to duty	<u>y)</u>							\$500 \$300	2.0		
2																		
3								-		***	,							
4								•										
5										*					***************************************			
District Company									_							_		

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Reporting Individual's Name Ogden, David W.		SCHEDUL	E C		6.3.5		. :	82	-J. 1991 5	11111		Päge N		of 13		
Part 1; Liabilities			· · · · · · · · · · · · · · · · · · ·				<del></del>							-		
Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, by automobiles, household furniture or appliances; and			- Non		None x		Calegosy of Amount or Value (x)									
or dependent children. Check to during the reporting period. Ex	he highest amount owed	liabilities owed to certain relatives listed in instructions.  See instructions for revolving charge accounts.  Type of Liability	Date Incurred	Interest Rate	Term if applicable	\$10,001.	\$15,001 - \$50,000	\$50,001 - \$100,000	100,001 - 250,000	\$250,001 -	500,001 -	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Socos 000
Examples: First District Bank, V	Vashington, DC	Mortgage on rental property, Delaware  Promissory note	1991	8% 10.%	25 yrs. on demand	Pagin	G 68	ω <i>φ</i> ⊥ <u>х</u>	9 9	ж. Х	<i>\$</i>	)    - 	69 69	<b>ө</b> ө	7-	O 6
1																
2																
3.						-										
4								-								_
5						-	١.									
* This category applies only if	the liability is solely that of the f	iler's spouse or dependent children. If the liability is that of the	e filer or a	joint liab	ility of the f	ler		du cons		1						
Report your agreements or a	ts or Arrangements arrangements for: continuing p 401k, deferred compensation, yer (including severance payn	(2) continuation	of absen	ce; and ( iations fo	4) future earth or any of th	pployi esc an	ment. S angem	te in ents	istruc or be	tions i nefits		ling tl	ne rep	orting	•	
Example:   Pursuant to partne		Agreement or Arrangement https://www.mpayment.of.capital.account & partnership share			D0	istania Vitania	ê Şpaniz	1.45.00.0	Panie	334P.A	2 V 4		V			ate // /85
calculated on servi	ce performed through 1/00.			Tall In		W W . 3 19		3	Jany 1	7.0		250				
1 Wilmer Halle Partner's Ca	1 Wilmer Hale Partner's Capitat: lump sum payment to be received in April 2009.  Wilmer Hale Partner's Capitat: lump sum payment to be received in April 2009.						-	2G01								
2 WilmerHale Defined Ben	vefit Plan: balance to be distrib	uted to IRA in 2009.			Wife	merH	ale, Wa	shin	gton,	DC			-		6/2	2001
3   will leave my funds in WilmerHale's 401k Plan (all individual holdings are reported on Schedule A) WilmerHale, Washington, DC							6/2	2001								
4 After my resignation, I w	ill receive the final payment of	my 2008 partnership share and a pro rated partnership s	hare for 2	2009.	W	merH	ale, Wa	shin	ncip,	DC:				<del>,</del>	6/2	1001
6									***************************************		X1	The Park of the Pa				
Prior Editions Cannot Re Used													-			

Reporting Individual's Name			The state of the s	Page Number		
Ogden, David W.		SCHEDULE D		10 (	10 of 13	
				711		
Part I: Positions Held Outs	the control of the co					
Report any positions held during the	applicable reporting period, whether e but are not limited to those of an officer,	consultant of any corporation, firm, partne non-profit organization or educational inst	rship, or other business enterprise or a	my		
director, trustee, general partner, prop	orietor, representative, employee, or	social, fraternal, or political entities and th	ose solely of an honorary nature.			
				None		
Organ Nat'l Assn. of Rock Collector	nization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)	
Examples: Nat I Assit. of Rock Collector Doe Jones & Smith, Hometov		Non-profit education  Law firm	President Partner	6/92 7/85	Present 1/00	
1 Wilmer Cutier Pickering Hale		Law Firm	Partner	6/01	Present	
Washington, DC	12000					
2		•				
3		· · · · · · · · · · · · · · · · · · ·				
4						
5						
6						
Report sources of more than \$5,000 c business affiliation for services provid the reporting period. This includes th	Excess Of \$5,000 Paid by One Sou compensation received by you or your ded directly by you during any one year of ne names of clients and customers of any	corporation, firm, partnership, or other but organization when you directly provided to of more than \$5,000. You need not report	siness enterprise, or any other non-prothe services generating a fee or paymen	fit if you are ar it Termination Vice Preside	ential IIal Candidate	
Source (Name and Address)			Brief Description of Duties			
Examples: Doe Jones & Smith, Hometon	wn, State Ooe Jones & Smith), Moneytown, State	Legal services in connection with university	construction			
1 Wilmer Cutler Pickering Hale	And Dorr	Legal Services	- Construction	100000000000000000000000000000000000000		
Washington, DC						
2 American Psychological Asso	ciation	Legal Services				
Washington, DC 20002 3 Fireman's Fund Insurance Co	manu	Legal Services		The state of the s		
Novato, CA 94998	трапу	Legal Services				
4 Lufthansa AG		Legal Services				
East Meadow, New York 1155	54					
5 Merck & Co., Inc.	20	Legal Services				
Whitehouse Station, NJ 0888  8 National Railroad Passenger		Legal Services	***************************************			
Washington, DC 20002						

Reporting Individual's Name		· · · · · · · · · · · · · · · · · · ·		Page Number		
Ogden, David W.	· • • •	SCHEDULE D	SCHEDULE D			
Part I: Positions Held Outside Report any positions held during the applic compensated or not. Positions include but director, trustee, general partner, proprietor	able reporting period, whether	consultant of any corporation, firm, partner non-profit organization or educational insti- social, fraternal, or political entities and the	tution. Exclude positions with religio	ny us. None		
Organizatio	n (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.) To (Mo., Yr.)		
Nat! Assn of Rock Collectors NY		Non-profit education	President	6/92 Present		
Examples: Doe Jones & Smith, Hometown, Str	ite Paris Table 1	Law firm	Partner	7/85 1/00		
1				İ		
2						
3						
4				4		
5						
6						
Part H: Compensation In Exce Report sources of more than \$5,000 compensations affiliation for services provided dithe reporting period. This includes the nare Source (Name and Address)  Examples:  Doe Jones & Smith, Hometown, St	nsation received by you or your rectly by you during any one year of nes of clients and customers of any ate	corporation, firm, partnership, or other bus organization when you directly provided the of more than \$5,000. You need not report.  Legal services	ne services generating a fee or payment the U.S. Government as a source.  Brief Description of Duties			
Metro University (client of Doe Jor 1 Pacifico Ford, Inc	nes & Smith), Moneytown, State	Legal services in connection with university of Legal Services	construction			
Philidelphia, PA 19153		Legal Services				
Pharmaceutical Research and Mar Washington, DC 2004	nufacturers of America (PhRMA)	Legal Services				
3 Realogy Corp		Legal Services				
Parsippany, NJ 07054		Legal Services				
4 Shell Oil Companu Houston, TX 77002		Legal Services				
5 Springfield Ford, Inc.		Legal Services				
Springfield, PA 19064						
6 Swiss International Air Lines, Ltd.		Legal Services				
Switzerland						

Reporting Individual's Name Ogden, David W.		SCHEDULE D	Page Number 12 of 13			
Ogdon, David VV.	<u> </u>					
Part I: Positions Held Outs Report any positions held during the a compensated or not. Positions include director, trustee, general partner, proper	pplicable reporting period, whether but are not limited to those of an officer.	consultant of any corporation, firm, partne non-profit organization or educational ins social, fraternal, or political entities and th	titution. Exclude positions with religious	iy is. None		
	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, Hometow	n, State	Law firm	Partner	1/00		
2						
3						
4						
5						
6	Community Co					
Report sources of more than \$5,000 co business affiliation for services provide	Excess Of \$5,000 Paid by One So ompensation received by you or your led directly by you during any one year of e names of clients and customers of any	corporation, firm, partnership, or other bu organization when you directly provided to of more than \$5,000. You need not repor	he services generating a fee or payment			
Source (Name and Address)	12 - 11 - 12 - 13 - 13 - 13 - 13 - 13 -		Brief Description of Duties			
Examples: Doe Jones & Smith, Hometov Metro University (client of Do	vn, State be Jones & Smith), Moneytown, State	Legal services  Legal services in connection with university	en ir acelekko en er			
1 300 East Camelback, L.L.C. Tempe, AZ 85281-5223		Legal Services				
2 Trading Bay Energy Corp Anchorage, AK 99508		Legal Services				
3 Allianz Life Insurance Novato, CA 94998	The state of the s	Legal Services		**************************************		
4 Citigroup Tampa, FL 33610		Legal Services				
5 BP America Warrenville, IL 60555		Legal Services				
6 Gregg L. Brelsford, PLLC Salt Lake City, UT 84102		Legal Services				
Prior Editions Cornet De Used				· · · · · · · · · · · · · · · · · · ·		

Reporting Individual's Name			and the state of t	Page Number		
Ogden, David W.		SCHEDULE D	13 0	13 of 13		
Part I: Positions Held Outside Report any positions held during the applica compensated or not. Positions include but a director, trustee, general partner, proprietor.	able reporting period, whether are not limited to those of an officer,	consultant of any corporation, firm, partn non-profit organization or educational ins social, fraternal, or political entities and t	stitution. Exclude positions with reli	or any igious.		
Organizațio	n (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)	
Nat'l Assn. of Rock Collectors, NY,	NY	Non-profit education	President	6/92	Present	
Doe Jones & Smith, Hometown, Sta	te	Law firm	Partner	7/85	1/00	
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2	14114117					
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Part II: Compensation In Exce Report sources of more than \$5,000 compensations affiliation for services provided dithe reporting period. This includes the name	nsation received by you or your rectly by you during any one year of	corporation, firm, partnership, or other by organization when you directly provided of more than \$5,000. You need not report	the services generating a fee or payr rt the U.S. Government as a source.	profit if you are an ment Termination Vice Preside	Filer, or ential ial Candidate	
			Brief Description of Duties	ar september 1 desper designation in the co		
Examples: Doe Jones & Smith, Hometown, Sta	ate	Legal services  Legal services in connection with university	v.construction			
Metro University (client of Doe Jones & Smith), Moneytown, State   Legal services in connection with university construction   1   Walt Disney Company (The)   Legal Services						
Lake Buena Vista, FL 32830						
2						
3			The state of the s			
4						
5				7,77		
6						
		L. L.		_		