## OCHE Form 278 (Rev. 12/2011) Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT 5 C.F.R. Parl 2634 US Office of Government Ethics

Form Approved: OMB No. 3209 - 0X01

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Agency Use Only	1		
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Schedule D - The reporting period is the preceding two calendar years and the current calendar year up to the date		Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)	Comments of Reviewing Officials (I
Arrangements) -snow any agreements or arrangements as of the date of filing.			Use Only
Schedule C, Part II (Agreements or	Date (Month, Day, Year)	Signature	Office of Government Ethics
year and the current calendar year up to any date you choose that is within 31 days of the date of filing.	3/4/16	(ache Doniell	Of the base is internal on ossioned in the repart. I canclede that the fale is a compliance with applicable two and regulations (object to any companies in the bird below).
Schedule C, Part I (Liabilities)-The reporting period is the preceding calendar	al Date (Month, Day, Year)	Signature of Designated Agency Ethics Official/Reviewing Official	Agency Ethics Official's Opinion
Schedule B-Not applicable.			agency)
as of any date you choose that is within 31 days of the date of filing.	Date (Month, Day, Year)	Signature of Other Reviewer	Other Review (If desired by
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	3.1.16		made on this form and all attached schedules are true, complete and correct to the best of my knowledge.
Vice President:	Date (Month, Day, Year)	Signature of Reporting Individual	Certification
Nominees, New Entrants and Candidates for President and	Yes	Not Applicable	to senate Confirmation
Schedule D is not applicable.	Do You Intend to Create # Qualified Diversified Trust?	gressional Committee Considering Nomination	Presidential Nominees Subject
Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends			Covernment During the Preceding 12 Nunths (If Not Same as Above)
Schedule D is not applicable.		Title of Position(s) and Date(s) Held	Position(s) Held with the Federal
where you must also include the filing year up to the date you file. Part II of	- 1	1800 Pennsylvania Ave NW Washington DC 20502	Present Office (or forwarding address)
the preceding calendar year except Part	Telephone No. (Include Area Code)	Address (Number, Street, City, State, and ZIP Code)	Location of
Reporting Periods Incumbents: The reporting period is	WHO	Special Assistant to the President for Legislative Affairs W	Filing
10 a \$200 fee.	Department or Agency (If Applicable)		Position for Which
than 30 days after the last day of the filing extension period, shall be subject	Amanda	Anderson	Individual's Name
after the date the report is required to be	First Name and Middle Initial	Last Name Fi	Reporting
Any in this repo		(Check Appropriate Boxes)	06/12/2012
Eas for late Hillag		Reporting Incumbent Calendar Year	Date of Appointment, Candidacy, Election, or Nomination (Myrith, Day, Year)

Supersedes Prior Editions

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5 C F R. Part 2634
U.S. Office of Government Ethics

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g 쿠			(8)	(S)	Bank of America Savings	Capitol One 360 Savings			Examples		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).	For you, your spouse, and dependent children, report each asset held for investment or the				Reporting Individual's Name	S. Office of Odvernilizett Ethics
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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 by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.								_				۲. به					
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				Frank Jones, San Francisco, CA	Nat'l Assn. of Rock Collectors, NY, NY	Source (Name and Address)	ror you, your spouse and rependent enterth, port the spouse, a creek covery tion, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$350 and (2) travel-related cash reimbursements received from one source totaling more than \$350. 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 itinerar dates, and the nature of expenses provided.	Part II: Gifts, Reimbur	his category applies only if the underlying and the filer with the						Example   Central Airlines Common	Identifi	feat property, stocks, comas, commonly futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.	children during the reporting period of any	Part I: Transactions Report any purchase, sale, or exchange hy you your snouse, or dependent	Reporting Individual's Name
				Leather briefcase (personal friend)	Airline ticket, hotel room & meals incident to national conference 6/15/9		ry, h	Expe	*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.							Identification of Assets			Do not report a transaction involving property used solely as your personal	SCHEDULE
					onal conference 6/15/99 (persona	Brief Description	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 \$140 or less. See instructions for other exclusions.  None	ses	ren. If the underlying asset is e egories of value, as appropriate						x 2/1/99	Si	urchase ale  Date (Mo., Day, Yr.)	Transaction Type (x)	None X	DULE B
			-		9 (personal activity unrelated to duty)		received by your spouse or dependent child totally tionship to you; or provided as personal hospitality lso, for purposes of aggregating gifts to determine the irce, exclude items worth \$140 or less. See instructions of the items worth \$140 or less.		ither held						×	\$ \$ \$ \$ \$ \$ \$ \$ \$	1,001 - 15,000 15,001 - 50,000 50,001 - 100,000 100,001 - 250,000 250,000 - 500,000 - 500,001 - 1,000,000	Amount of Transaction (x)		
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Reporting Individual's Name

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

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7/85	State	1.		State	etown,	& Smith, Hometown, State	Smitt	Doe Jones &	0	p share	artnership	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Pursuant to partnership agreemed to calculated on service performed t	Example	Exa
Date			, v	Parties								Status and Terms of any Agreement or Arrangement	Status and		
ne T	of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.  None	ure employment. See instructions rega any of these arrangements or benefits.	uctio s or b	instr	t. See angei	ymeni se arr	mploy f thes	future er or any o	of absence; and (4) fut ing of negotiations for	sence; of negot	of ab	Part II: Agreements or Arrangements Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves	I: Agreements or arrangements or arrangements or arrangements or arrangements of a former employer ment by a former employer	Report your : employee bettion of paym	Reg cio
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Ov	\$1, \$5, \$5, \$2,					\$50	\$1	icable	2	-	Incurred	Type of Liability	Creditors (Name and Address)		
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	Category of Amount or Value (x)	mount o	y of A	ategor	ဂ္ဂ	П					None 🗸	a mortgage on your personal residence unless it is rented out; loans secured by	Part I: Liabilities Report liabilities over \$10,000 owed	art I	P;
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Reporting Individual's Name		SCHEDULE D		age N
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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,	Outside U.S. Goven applicable reporting period, wheth not limited to those of an officer.	nt	organization or educational institution. Exclude positions with religious, social, fraternal, or political entities and those solely of an honorary	with
trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit	epresentative, employee, or consul- other business enterprise or any r			
Organization (Name and Address)	e and Address)	Type of Organization	Position Held	From (Mo., Yr.)
Nat'l Assn. of Roc		Non-profit education	President	6/92
Examples Doe Jones & Smith. Hometown, State		<del>  </del>	Partner	7/85
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Part II: Compensatio	n in Excess of \$5,0	Part II: Compensation in Excess of \$5,000 Paid by One Source	Do not complete this part if you are an Incumbent, Termination Filer, or Vice	part on F
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	compensation received by you or y ded directly by you during any one names of clients and customers of the purines of the names of clients and customers or any other business enterprise, or any other puriness.		aym rnn	ientia You
Source (Name and Address)	and Address)	Вгі	Brief Description of Duties	
Examples	Notes University Client of Day Jones & Smith), Moneytown, State	Legal services in connection with university construction	ruction	İ   1