## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

OGE Use Only	(Check box if comments are continued on the reverse side)	(Check box if comments a	·
Agency Use Only			
of filing.	ndicate number of days}	(Check box if filing extension granted & indicate number of	amelamuskaleriteet
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 as of the date of filing.			Use Only
Schedule C, Part II (Agreements or Arrangements)—Show any 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.	4/13/2015	Lax A.K.	On the basis of information contained in this report, I conclude that the filer is in compilance with applicable laws and regulations (subject to any comments in the box below).
reporting period is the preceding calendar	Date (Month. Day, Year)	Signature of Designated Agency Ethics Official/Reviewing Official	Agency Ethics Official's Opinion
Schedule B-Not applicable.	81.00/1/00	Down Stew	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	April 2, 2015		I CLEVITY that the statements I have made on this form and all atrached schedules are true, complete and correct to the best of my knowledge.
Vice President:	Date (Month, Day, Year)	Signature of Reporting Individual	Certification
Candidates for President and			
NO STATE OF THE PROPERTY OF TH	X	$\rightarrow$	to Senate Confirmation
at the date of termination, Part II of Schedule D is not applicable.	Do You Intend to Create a Qualified Diversified Trust?	Name of Congressional Committee Considering Nomination   Do You Intend to	4
Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends	ne Response, November 2013-present 2013	Special Assistant to the President and Director of Progressive Media and Online Response, Nov Director of Progressive Media and Online Response, May 2011 to November 2013	Position(s) Held with the Federal Government During the Preceding 12 Months (II Not Same as Above)
where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.	202-456-1414	1600 Pennsylvania Avenue, Washington, DC 20502	Present Office (or forwarding address)
If of Schedule C and Part I of Schedule D	Telephone No. (Include Area Code)	Address (Number, Street, City, State, and ZIP Code)	Location of
Reporting Periods Incumbents: The reporting period is	White House, Executive Office of the President	SAP and Director of Progressive Media & Online Response White House, Ex	Filing
to a \$200 fee.	Department or Agency (If Applicable)	Title of Position Department or /	
than 30 days after the last day of the filing extension period, shall be subject	O	Lee	Individual's Name
after the date the report is required to be filed, or, if an extension is granted, more	Middle Initial	Last Name and Middle Initial	
his report and does so more than 30 days		nate 2014	11/04/2013
Fee for Late Filing	Termination Termination Date (If Appli- Filer ————————————————————————————————————	Reporting Incumbent Calendar Year New Entrant, Status	Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)

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the preceding two calendar years and the current calendar year up to the date		his sheet)	(If additional space is required, use the reverse side of this sheet)	Comments of Reviewing Officials (I
arrangements as of the date of filing.	ana		,	Use Only
Schedule C. Part II (Agreements or Arrangements)—Show any agreements or	Date (Month. Day, Year)		Signature	Office of Covernment Ethics
year and the current catendar year up to any date you choose that is within 31 days of the date of filing:				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).
Schedule C, Part I (Liabilities)-The reporting period is the preceding calendar	Date (Month, Day, Year)	ing Official	Signature of Designated Agency Ethics Official/Reviewing Official	Agency Ethics Official's Opinion
Schedule B-Not applicable.				(If desired by 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
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	3/0/5		7	IÇERȚIFY that the struements have 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
Candidates for President and				
Nominees, New Entrants and	X ¥	Yes	Not Applicable	to Senate Confirmation
Schedule D is not applicable.	Do You Intend to Create a Qualified Diversified Trust?		Name of Congressional Committee Considering Nomination	
Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends			Tide of Position(s) and Date(s) Held	Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)
where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.	202-456-7681	######################################	1600 Pennsylvania Avenue, Washington, DC 20502	Office g address)
If of Schedule C and Part I of Schedule D	Telephone No. (Include Area Code)		Address (Number, Street, City, State, and ZIP Code)	Location of
Reporting Periods Incumbents: The reporting period is	cutive Office of the President	White House, Executive Office of	Director of Progressive Media & Online Response	Filing for Which
(0 & \$200 tee.	ency (If Applicable)	Department or Agency	Title of Position.	,
than 30 days after the last day of the filing extension period, shall be subject	C	Jesse	Lee	Individual's Name
filed, or, if an extension is granted, more	ddle Initial	First Name and Middle Initial	Last Name	7
this report and does so more than 30 days			Σ	11/04/2013
	Termination Termination Date (If Appli- Filer	New Entrant,	Reporting Incumbent Calendar Year Status Covered by Report	Date of Appointment, Candidacy, Election, or Nomination (Month, Dav. Year)

## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

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year and the current calendar year up to any date you choose that is within 31 days of the date of filing.			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).
Schedule C, Part I (Liabilities)-The reporting period is the preceding calendar	Signature of Designated Agency Ethics Official/Reviewing Official Date (Month, Day, Year)	Signature of Desi	Agency Ethics Official's Opinion
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as of any date you choose that is within 31 days of the date of filing.	r Reviewer Date (Month, Day, Year)	Signature of Other Reviewer	Other Review
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			(CEXTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge.
Vice President:	rting Individual Date (Month, Day, Year)	Signature of Reporting Individual	Ц
Nominees, New Entrants and Candidates for President and	Yes X No	Not Applicable	to Senate Confirmation
	Name of Congressional Committee Considering Nomination   Do You Intend to Create a Qualified Diversified Trust?	Name of Congress	Presidential Nominees Subject
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	Title of Position(s) and Date(s) Held	Title of Position(s	Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)
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le) Ine preceding calendar year except Fart I of Schedule D	Address (Number, Street, City, State, and ZIP Code)  Telephone No. (Include Area Code)	Address (Number	Location of
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to a \$200 fee.	Department or Agency (If Applicable)	Title of Position	,
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filed, or, if an extension is granted, more	First Name and Middle Initial	Last Name	
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Reporting Is Lee, Jesse C	Reporting Individual's Name 9e, Jesse C								S	CH	SCHEDULE	In		<b>∀</b>	÷									Pag	Page Number	f
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	BLOCK A				BLO	BLOCK B												BL	BLOCK	U						
For you	For you, your spouse, and dependent children, report each asset held for investment or the			Albania.			100000000000000000000000000000000000000	engiamen	i Gasti		30.01	1272.2020	L i	уp	e					A	Amount	unt				
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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.											ELECTRICAL AND	RIOCK A	Assets and Income	esse C	Reporting Individual's Name
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										Date (Mo., Day, Yr.) Only if Honoraria			)1)" is item.		

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

Certificate of divestiture Value None X \$385 \$500 000'000'0S\$ 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 the U.S. Government; given to your agency in connection with official travel; ₽ 252'000'000 \$2'000'000 Page Number Amount of Transaction (x) 000'000'5\$ 100'000'5\$ \*000'000'1\$ OAGL 2200'000'1\$ 200'001 -000'00\$\$ 100'0\$Z\$ Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)

Leather briefcase (personal friend) 000'09Z\$ 100'00T\$ 000'001\$ -100'05\$ -100'51\$ \*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. 000's IS (Mo., Day, Yr.) 2/1/99 **Brief Description** Excusuão for other exclusions. None X SCHEDULE Purchase Part II: Gifts, Reimbursements, and Travel Expenses Check the "Certificate of divestiture" block residence, or a transaction solely between Do not report a transaction involving property used solely as your personal you, your spouse, or dependent child to indicate sales made pursuant to a certificate of divestiture from OGE. authority, etc. For travel-related gifts and reimbursements, include travel itinerary, (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 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 \$350 and dates, and the nature of expenses provided. Exclude anything given to you by as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory Identification of Assets amount of the transaction exceeded \$1,000. children during the reporting period of any Include transactions that resulted in a loss, real property, stocks, bonds, commodity Report any purchase, sale, or exchange futures, and other securities when the Source (Name and Address) Nat'l Assn. of Rock Collectors, NY, NY Part I: Transactions by you, your spouse, or dependent Frank Jones, San Francisco, CA Example | Central Airlines Common Reporting Individual's Name Lee, Jesse C Examples

Reporting Individual's Name Lee, Jesse C	SCHEDULE B contin	itinued d)	Ö.		Page Number	
Part I: Transactions						
	Transaction Type (x)	ction (x)		Amount	t of Transaction (x)	
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Fart	Part I: Liabilities Report liabilities over \$10,000 owed	a mortgage on your personal residence	None X		L								
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during your sp Check ti during t	during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.				000° - 100° - 100°	- 100.0 000.0 -100.0	000,0 1,00,0 000,0	000'000 - 100'00 - 100'00	*000,000 -100,000 -100,000	- 100,000 - 000,000,	000'000' - 100'000'	*000'000 *
	Creditors (Name and Address)	Type of Liability	p	Rate	applicable	PHARMATALIA	OT\$	)\$\$ \$Z\$	040 04° 05°S	i LS	\$5\$ \$2°		9 <b>5\$</b>
Examples	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	H	25 yrs.		×						
	John Jones, Washington, DC	Promissory note	6661	10%	on demand		NAME OF THE PERSON NAME OF THE P	×		1000			
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*This c with th	ategory applies only if the liability is an espouse or dependent children, mark	*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.	ren. If the liabi	lity is tha	t of the filer	or a joint	liability (	of the file			Poverence of the second		200
Part	Part II: Agreements or Arrangements	Arrangements		٠				:					
Report employ tion of 1	Report your agreements or arrangements for: (1) continuing employee benefit plan (e.g. pension, 401k, deferred compention of payment by a former employer (including severance	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	of absence ing of negc	; and (4) otiations	of absence; and (4) future employment. See instructions regarding the report- ing of negotiations for any of these arrangements or benefits. Non	oloymen chese arr	t. See in angeme	struction nts or b	ns rega enefits	arding.	the rep	ort- None 🔀	
	Status and Te	Status and Terms of any Agreement or Arrangement					Pa	Parties				Date	به
Example	Pursuant to partnership agreement, will receive lump sum pacalculated on service performed through 1/00,	will receive lump sum payment of capital account & partnership share ough 1700,	artnership share		Doe Jones & Smith, Hometown, State	mith, Hom	etown, Sta	ıte				7/85	is.
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OGE Form 278 (Rev. 12/2011) 5 C.F.R. Part 2634 U.S. Office of Government Ethics Reporting Individual's Name

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E R	Reporting Individual's Name Lee, Jesse C		SCHEDULE D	P	Page Number	
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≅ਾਰ	Part I: Positions Held (	Outside U.S. Government policable reporting period, whether compen-		organization or educational institution. <b>Exclude</b> positions with religious	with religious.	
ar tr	sated 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	t limited to those of an officer, di esentative, employee, or consulta her business enterprise or any no		social, fraternal, or political entities and those solely of an honorary nature.	None	$\boxtimes$
П	Organization (Name and Address)	d Address)	Type of Organization	Position Held	From (Mo., Yr.) To (Mo., Yr.,	J., Yr.)
T3 5	Nat'l Assn. of Roc			President	┉	nt I
4 X	Doe Jones & Smith, Hometown, State		The state of the s	Partner	7/85 1/00	
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٦	Part II: Compensation in Excess of \$5,000 Paid by One Sour	in Excess of \$5,00	Paid	Do not complete this part if you are an Incumbent, Termination Filer, or Vice	art if you are a on Filer, or Vice	תו
요휴모존	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	pensation received by you or you directly by you during any one y ames of clients and customers of susiness enterprise, or any other		non-profit organization when Presidential or Presidential Candidate 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.	intial Candidate ou None N	₹ .
	Source (Name and Address)	Address)	Brief	Brief Description of Duties		
ӯ	Examples Doe Jones & Smith, Hometown, State		Legal services			 
<b></b>	Metro University (client of Doe Jones & Smith), Moneytown, State	th), Moneytown, State	Legal services in connection with university construction	tion		
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