## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

			Comments of Reviewing Officials (If	Use Only	מין אַלין מין	On the basis of information contained in this report, Loanclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below)	Agency Ethics Official's Opinion	agency)	Other Review	incas ur i that the statements have made on this form and all attached schedules are true, complete and correct to the best of my knowledge.	Ш		Presidential Nominees Subject		Position(s) Held with the Federal	ice ldress)	Location of	Filing		Individual's Name	Reporting	or Nomination (Month, Day, Year)	Date of Appointment, Candidacy, Election,
(Chec)		(Check box if filing ext	Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)		Signature	for Meda	Signature of Designated Agency Ethics Official/Reviewing Official	4	Signature of Other Reviewer		Signature of Reporting Individual	Not Applicable	Name of Congressional Committee Considering Nomination	Special Assistant to the President and Principal Deputy Director of Scheduling	Title of Position(s) and Date(s) Held	1600 Pennsylvania Avenue NW, Washington, DC 20502	Address (Number, Street, City, State, and ZIP Code)	Deputy Assistant to the President & Director of Scheduling	Title of Position	_orjuste	Last Name	Status (Check Appropriate X Covered by Report N (Check Appropriate X 2014)	Incumbent Calendar Year
(Check box if comments are continued on the		(Check box if filing extension granted & Indicate number of days	sheet)		Date (Month, Day, Year)	5/24	Official Date (Month, Day, Year)	~	Date (Month, D	03/30	Date (Month, Day Year)	Yes	Do You Intend to Create a Qualit	actor of Scheduling		202-456-1414	Telephone No. (1	White House/Executive Office of the	Department or Agency (If Applicable)	Gregory	First Name and Middle Initial	Fler	New Entrant. Termination Ter
the reverse side)			the curren	Arrangeme		24/2315 year and the curren any date you choose of the date of filing.		22   2015 Schedu	th, Day, Year) as of any of 31 days of	30/70/5 Schedu for income calendar y year up to		THE THE STREET, AND THE STREET,	Hversified Trust?	Termina period beg	Schedule I	where you year up to	(Include Area Code) the preced	of the President   Incumbe		than 30 da filling exte	after the c	cable) (Month, Day, Year) Any indi this repor	
OGE Use Only	Agency Use Only		Schedule D—The reporting period is the preceding two calendar years and the current calendar year up to the date	Arrangements)-Show any agreements or arrangements as of the date of filing.	Schedule C, Part II (Agreements or	year and the current calendar year up to any date you choose that is within 31 days of the date of filing.	Schedule C, Part I (Liabilities)—The reporting period is the preceding calendar	Schedule B-Not applicable.	as of any date you choose that is within 31 days of the date of filing.	Schedule A-The reporting period for income (BLOCK C) is the preceding calendar real rand the current calendar year up to the date of filing. Value assets	sldent:	Nominees, New Entrants and Candidates for President and	Schedule D is not applicable.	Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends	Schedule D is not applicable.	where you must also include the filing year up to the date you file. Part II of	the preceding calendar year except Part	Reporting Periods Incumbents: The reporting period is	fee.	than 30 days after the last day of the filing extension period, shall be subject	after the date the report is required to be filed, or, if an extension is granted, more	Fee for Late Filing Any individual who is required to file this report and does so more than 30 days	

Supersedes Prior Editions.

U.S. Office of Government Ethics Reporting Individual's Name Lorjuste, Gregory  Assets and Income
Assets and income
For you, your spouse, and dependent children,
report each asset neto 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).
Central Airlines Common
Examples Doe Jones & Smith, Hometown, State
Kempstone Equity Fund
Guaranteed (TIAA Traditional) Spouse
<sup>2</sup> GREF Stock (Spouse)
3 TIAA Real Estate (Spouse)
4 CREF Bond Market (Spouse)
5

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.					5							BLOCK A	Assets and I		Lorjuste, Gregory	Reporting Individual's Name
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bettered best have been best best best best best best best best										Other Income (Specify Type & Actual Amount)			Income: type and amount. If "None (or less than \$201)" i checked, no other entry is needed in Block C for that item.	3 9		rage number
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Part I: Transactions   Part I: Transactions   Part I: Transaction   Part I: Transactio	Actions  lie, or exchange dependent outing period of any our your spouse, or dependent on exceeded \$1,000.  at resulted in a loss.  Identification of Assets    Continuation of Assets   Continuatio
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.  on of Assets  School 1000 1 1000 1000 1000 1000 1000 1000	SCHEDULE B  Page Number of Transaction (x) of Assets  SCHEDULE B  Page Number of Office (x) of Transaction (
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Do not complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

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Part I: Liabilities Report habilities over \$10,000 owed	a mortgage on your personal residence unless it is rented out; loans secured by	None X	And the second s		ALOGATE	Category of Amount or Value	r Valle (v)		#13#14#################################
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	automobiles, household turniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.		_	,001 ,000 ,001 - ,000	,001 - 0,000 0,001 - 0,000 0,001 -	0,000 0,001 - 000,000	000,000* 000,001- 000,000	000,001 - ,000,000 ,000,001 -	,000,000 r ,000,000
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Part II: Agreements or arrangement employee benefit plan (e.g. pension, 401 tion of payment by a former employer (i	<b>Part II: Agreements of Afrangements</b> 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; a	of absence; and (4) future of ing of negotiations for any	employment. See instructions regarding the report- of these arrangements or benefits.	. See instru angements	ictions rega or benefits	arding tl	he report Nor	None
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ons with religious, an honorary None	organization or educational institution. <b>Exclude</b> positions with religious social, fraternal, or political entities and those solely of an honorary nature.	7 🛁	Outside U.S. Government pplicable reporting period, whether compennot limited to those of an officer, director, presentative, employee, or consultant of other business enterprise or any non-profit	Positions Held positions held during the a t. Positions include but are leral partner, proprietor, reation, firm, partnership, or	Part I: Report any sated or no trustee, gen any corpora
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