Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

	(Check box if comments are continued on the reverse side)
OGE Use Only	*
4/15/2016 KHIC	
Agency Use Only	
	(Check box if filing extension granted & indicate number of days)
the preceding two calendar years and the current calendar year up to the date of filing	Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)
arrangements as of the date of filing. Schedule D—The reporting period is	Use Only
Schedule C, Part II (Agreements or Arrangements)—Show any agreements or	Office of Covernment Ethics Signature Date (Month, Day, Year)
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 that of copulations (subject to the filer) of the filer is in compliance with applicable laws and regulations (subject to the filer).
reporting period is the preceding calendar	Agency Ethics Official's Opinion Signature of Designated Agency Ethics Official/Reviewing Official Date (Month, Day, Year)
Schedule B-Not applicable.	agency)
31 days of the date of filing.	Other Review Signature of Other Reviewer Other Review
Schedule A- Lie reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets year up to the date of filing, is within a comparation of the date of the date of the date.	0-
	Certification Signature of Reporting Individual Date (Month, Day, Year)
Vice President:	
Nominees, New Entrants and	to Senate Confirmation Not Applicable
Schedule D is not applicable.	Name of Congressional Committee Considering Nomination Do You Intend to Create a Qualified Diversified Trust?
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	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.	ice dress)
II of Schedule C and Part I of Schedule D	Location of Address (Number, Street, City, State, and ZIP Code) Telephone No. (Include Area Code)
Reporting Periods Incumbents: The reporting period is the preceding calendar year except Part	Filing Deputy Assistment to the President WHO PPD
	Title of Position Department or Agency (If Applicable)
than 30 days after the last day of the filing extension period, shall be subject to a \$200 fee.	Individual's Name Noble
filed, or, if an extension is granted, more	Last Name First Name and Middle Initial
Fee for Late Filing Any individual who is required to file this report and does so more than 30 days after the date the report is required to be	Date of Appointment, Candidacy, Eectoon, Reporting or Nomination (Nomin, Dav, Year) Status (Check Appropriate Boxes) Status (Check Appropriate Boxes) Status (Check Appropriate Boxes) Status (Check Appropriate Boxes) Status (Check Appropriate Boxes)
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							 	Law Partnership Income \$130,000		Other Income (Specify Type & Actual Amount)		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	Page Number 2 of
										Date (Mo., Day, Yr.) Only if Honoraria		.)" is em.	5

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

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			Brown University	Frank Jones, San Francisco, CA	Nat'l Assn. of Rock Collectors, NY, NY	Source (Name and Address)	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 (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 itinerary, dates, and the nature of expenses provided. Exclude anything given to you by	Part II: Gifts, Reimbursements,	This category applies only if the underlying asset by the filer or jointly held by the filer with the spo					Example Central Airlines Common	Identification of Assets	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 by you, your spouse, or dependent	Reporting Individual's Name	
		School of Public Policy on	Flight and ground transportation	Leather briefcase (personal friend)	Airline ticket, horel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)			ments, and Travel Expenses	*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.						on of Assets	Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	residence, or a transaction solely between you, your spouse, or dependent child.	Do not report a transaction involving property used solely as your personal	SCH	The state of the s
		10/21/	すっつくる		national confer	Bri	the U.S. Government; given to your agency in connection with official travel; 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	nses	nildren. If the categories of			N.	¥.,	×	Pu	ırchase Ç	,	None X Cut	SCHEDULE	
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			eech		ial activ		your agency in connection with official travel; and by your spouse or dependent child totally in to you; or provided as personal hospitality at purposes of aggregating gifts to determine the clude items worth \$140 or less. See instruction None	×	either te.		NA.				\$1	,001	Γ			
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				and the same of th	4043	natha in was	on service performed thr	Status and To	eements of ents or arrangement in (e.g. pension, 401 t former employer ()	only if the liability is pendent children, mar					14	John Jones, Washington, DC	First District Bank, Washington, DC	Creditors (Name and Address)	during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	lities r \$10,000 owed	me	thics
			History Wild and Section 2	The second secon	3	alea to dans	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through $1/00$.	Status and Terms of any Agreement or Arrangement	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) continua- tion of payment by a former employer (including severance payments); (3) leaves	*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.						Promissory note	Mortgage on rental property, Delaware	Type	or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	a mortgage on your personal residence unless it is rented out; loans secured by		
The state of the s	are a contractive and a contra					L' Contribution	nent of capital account & p	Arrangement	nts articipation in an tion); (2) continua- ayments); (3) leaves	oouse or dependent child ries, as appropriate.						The state of the s	perty, Delaware	Type of Liability	iabilities owed to ed in instructions. revolving charge	a mortgage on your personal residence unless it is rented out; loans secured by automobiles household furniture	S	The state of the s
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Reporting Individual's Name		SCHEDULE D		Page Number S of 5	American management
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Part I: Positions Held Outside U.S. Government Report any positions held during the applicable reporting period, whether compensations are positions held during the applicable reporting period, whether compensations are provided in the compensation of the compensati	itside U.S. Government able reporting period, whether compensation of the compensation	###	organization or educational institution. Exclude positions with religious,	with religious,	
saled of not, rositions include but are not number to choose or an one-cet, wherever, the contrastee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit	entative, employee, or consultative, employee, or consultative enterprise or any no		the many chart many or other	None 🔀	C.
Organization (Name and Address)	Address)	Type of Organization	Position Held	From (Mo., Yr.) To (Mo., Yr.)	لتا
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Part II: Compensation in Excess of \$5,000 Paid by One Source 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 need not report the U.S. Good paid by One Source non-profit organization when the reporting a fee of the reporting period.	n Excess of \$5,00 ensation received by you or you irectly by you during any one nes of clients and customers of siness enterprise, or any other siness enterprise, or any other	Lid	by One Source Incumbent, Termination Filer, or Vice non-profit organization when 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.	part if you are an ion Filer, or Vice lential Candidate. You None	Latina and Assessment of the State of the St
Source (Name and Address)	dress)		Brief Description of Duties		L
Examples Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State), Moneytown, State	Legal services in connection with university construction	tion	- Wester Steelers Steelers Steelers Employ Commission Volume Springer	100
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