UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR NEW EMPLOYEE AND CANDIDATE REPORTS

Last Name		First Name and Middle	Initial		New Employee Repo		Senate Office / Agency in White	ch Employed		
					Date of Employmer	nt (mm/dd/yy):				
Senate/Candidate Office Address (Number,	Street, City, State, and ZIP)	Senate/Candidate Offic	e Telephone	e No.	Candidate Report	Condidoov	State in which you are a candi	date		
					Commencement of	(mm/dd/yy):				
A	AFTER READIN	G THE INST	RUCTI	ONS -	ANSWER EAC		SE QUESTIONS			
			YES	NO					YES	NO
Did you or your spouse have earn	ed income (e.a. salari	es or fees) or non-								
investment income of more than \$					Did you hold any repo	rtable positions	during the reporting perio	d?		
reporting period?	5 1				If Yes, Complete and					
If Yes, Complete and Attach PAR	T II.									
Did you, your spouse, or depende	nt child hold any report	table			D.1 1		, <u>, , , ,</u>			
asset worth more than \$1,000 at t					Did you have any repo entity on the filing date		ent or arrangement with ar	n outside		
or investment income of more that		period?			If Yes, Complete and		(
If Yes, Complete and Attach PAR	T IIIA and/or IIIB.									
Did you your apougo, or depende	nt shild have any range	tabla liability			Did you reasive some	anaction of ma	ra than [©] E 000 from a ging	la courac in		
Did you, your spouse, or depende (more than \$10,000) during the re					the two prior years?		re than \$5,000 from a sing			
If Yes, Complete and Attach PAR					If Yes, Complete and	Attach PART X				
· 1					, ,					
Each qu	estion must be	answered an	nd the	appro	priate PART at	ttached fo	r each "YES" res	ponse.		
									0.00	
File this report and any					•		•	rt Senate	Office	
Building, U.S. Senate, W	Vashington, DC	20510. \$200 P	Penalty	for fili	ng more than 30) days afte	r due date.			
This Financial Disclosure St	atement is require	d by the Ethics i	n Gover	rnment A	Act of 1978, as am	ended. The	statement will be	FOR OFFI	CIAL USE	ONLY
made available by the Office								Do Not Writ	e Below t	his Line
reviewed by the Select Corr										
fails to file this report may be										
Certification		Signature of Rep			5.0. upp. 1, 3 101	-	(Month, Day, Year)			
I CERTIFY that the statements I		Cignature of Rep				Date	month, Day, roar			
have made on this form and all										
attached schedules are true,										
complete and correct to the best of my knowledge and belief.										
my movioago ana bollot.	Fo	r Official Use Only - D	Do Not Wr	rite Below	This Line	3				
		Signature of Re				Date	(Month, Day, Year)			
It is the Opinion of the reviewer that the statements made in this form										
are in compliance with Title I of the										
Ethics in Government Act.										
	1					1				

PART II. EARNED AND NON-INVESTMENT INCOME

Page Number

Report the source (name and address), type, and amount of earned income to you from any source aggregating \$200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate \$1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:

For you and /or your spouse, report honoraria income received which aggregates \$200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

		Name of Income Source		Address (City, State)	Туре о	of Income	Amount
Exam	nle [.]	JP Computers	Wash., DC	Example	Salary	Example	\$15,000
Exam	p10.	MCI (Spouse)	Arlington, VA	Example	Salary	Example	Over \$1,000
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Reporting Individual's Name	P	AR'	T II	IA.	F	יטי	BL	ICI	_Y	TR	RAI	DE	D	AS	SE	ETS	5 A	NC) U	NE	EARNE	ED	IN	CO	M	ES	501	JR	CE	S		Pag	e Number
BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources Report the complete name of each public	:lv		At	Val the of Nor	uati close ne, o	i on e of r r les:	epor s tha	\ss ting n \$1	peric ,001					lf "	Non	e (or				01)" i	ype and s Checkec received	d Ar I, no	othe	unt er ent	try is	nee	ded	in Bl				titen	n. This
traded asset held by you, your spouse, o				Ch	Check the first column. Type of Income Amount of Income																												
 your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which: (1) had a value exceeding \$1,000 at th close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan. 	than \$1.001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actual Amount Required if "Other" Specified
S, IBM Corp. (stock)				X				•						Х							Example		X										Example
or J (S) Keystone Fund					Х													х			Example	Х											Example
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EXEMPTION TEST (see instructions before marking b *** This category applies only if the asset is/was held in																												as ap	oprop	oriate).		

Reporting Individual's Name	I	PAF	R T	IIIB	. N	101	N-P	UE	3LI	CL	۲Y	ſRA	۱D	ED	AS	SE	TS	5 AI	ND	UN	NEARN	IEC) IN	ICO	ЭΜ	ES	50	UR	CE	S		Pag	e Number
BLOCK A Identity of Non-Publicly Traded Assets and Unearned Income Source Report the name, address (city, state and			Ļ	At the If No	luat	e of i or les	of a report s that	Ass ting an \$1	perio 1,001	od.										Т	ype and		_OC ກວເ		of I	nco	ome	ļ					
description) of each interest held by you, your spouse, or your dependent child (Se				C	neck	line i	iist t	Joiun							-	Тур	e of	f Ind	com	ne						Am	oui	nt o	f In	con	ne		
 p.3, CONTENTS OF REPORTS Part B of Instructions) for the production of income or investment in a <u>non-public</u> trade or business which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include the above report for each underlying asset, which is not incidental the trade or business. Publicly traded assets held by non-public entity may be listed on Part IIIA. 	of e	None (or less than \$1,001) \$1 001 \$15 000	\$1,001 - \$13,000 \$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actual Amount Required if "Other" Specified
S, JP Computer, Software Design, Example: DC, Wash DC				x		Ī		Ī		Ī				x							Example		х					Ī					Example
or J Undeveloped land, Dubuque, Iow	'a				Х								Х								Example	Χ		_		-						-	Example
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Re	porting Individual's I	Name		PART VII.	LIAB	ILITIE	S									Page	Numbe	r
									Ca	tego	ory o	of Ar	nou	nt o	f Va	lue	(x)	
accounts.											\$5,000,001 - \$25,000,000	,000,000	Over \$50,000,000					
	Name o	of Creditor	Address	Type of Liability				\$10,001	\$15,001	\$50,001	\$100	\$250	\$500	Over	\$1,00	\$5,0(\$25,(Over
	S,	First District Bank	Wash., DC	Mortgage on undeveloped land	1992	13%	25yrs			X		Ε	Х	Α	Μ	Ρ	L	Ε
	Example: DC, or J	(J) John Jones	Wash., DC	Promissory Note	2000	10%	On dmd				X	Е	Χ	Α	Μ	Ρ	L	Е
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EXE *** 1	EMPTION TEST	(see instructions before m es only if the asset is/was h	arking box): If you omitted an eld independently by the spous	y asset because it meets the three-part test for e or dependent child. If the asset is/was either he	exemption eld by the file	described er or jointly	l in the ins held, use t	tructic he oth	ons, pl ner cate	ease egorie	check s of va	box t ilue, a	o the s appr	right. opriat	e.			

PART VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT

Report any positions held by you during the applicable reporting period whether compensated 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 organization or educational institution. Both the year and month must be reported for the period of time that the position was held.

Exclude: Positions with federal government, religious, social, fraternal, or political entities, and those solely of an honorary nature.

N	ame of Organization	Address (City, State)	Type of Organization	Position Held	From (Mo/Yr)	To (Mo/Yr)
Example:	National Assn. of Rock Collectors	NY,NY EXAMPLE	Non-profit education	President	6/91	Present
Example.	Jones & Smith	Hometown, USA EXAMPLE	Law Firm	Partner	7/96	11 / 1X
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Compensation in excess of \$200 from any position must be reported in Part II.

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PART IX. AGREEMENTS OR ARRANGEMENTS

Report your agreements or arrangements for future employment (including agreements with a publisher for writing a book or sale of other intellectual property), leaves of absence, continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan. See Instructions regarding the reporting of negotiations for any of these arrangements or benefits.

	Status and Terms of any Agreement or Arrangement	Parties		Date
Example:	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on services performed through 11/1X and retained pension benefits (diversified, independently managed, fully funded, defined contribution plan)	Jones & Smith, Hometown, USA	Example	1 / 94
Example.	Employment agreement with XYZ Co. to become Vice President of Government Relations. Terms of agreement include salary between \$50,001-\$100,000, signing bonus between \$2,501-\$5,000 and stock options	XYZ Co., Bethesda, MD	Example	1 / 1X
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Page Number

PART X. COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

FIRST TIME FILERS ONLY:

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or .any non-profit organization when you directly provided the services to the clients and/or customers of the firm that generated a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

	Name of Source	Address of Source	Brief Description of Dution	es
Example:	Jones & Smith	Hometown, TX	Legal Services	EXAMPLE
Example.	Metro University (client of Jones & Smith	Moneytown, USA	Legal Services in connection with university construction	EXAMPLE
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Page Number

CONFIDENTIAL DISCLOSURE OF CANDIDATES HOME ADDRESS

Last Name	First Name and Middle Initial	Commencement of Candidacy
Home Mailing Address (Number, Street, City, State, and ZIP)	Home Telephone Number (Include Area Code)	
Office Mailing Address (Number, Street, City, State, and ZIP)	Office Telephone Number (Include Area Code)	

Who Must File: Any candidate who files a public financial disclosure report with the Senate Select Committee on Ethics must also file this confidential report.

<u>Where to File</u>: File this report with the **Select Committee on Ethics**, Room 220, Hart Senate Office Building, U.S. Senate, Washington, DC 20510.

When to File: Within 30 days after becoming a candidate for nomination or election to the office of Member of the United States Senate, or by May 15 of that calendar year, which ever is later, but at least 30 days before the election, and on or before May 15 of each succeeding year an individual continues to be a candidate. A candidate who currently holds an elected position in the United States Congress is not required to file a Candidate Report.

Contents of Reports: List your home and office address and phone number. Please sign your report certifying that your report is complete and correct.

Penalty Provisions: 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 filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period, shall be subject to a \$200 penalty fee. Waivers of this fee may be granted by the Committee in extraordinary circumstances if requested in writing. Falsifying or failing to file this report may result in the imposition of civil and criminal sanctions. (See 5 U.S.C. app. 4, § 101 et seq. and 18 U.S.C. § 1001.)

<u>Review of Reports</u>: These reports will be reviewed by the Committee along with the corresponding public reports within 60 days of the filing date. These reports will be kept confidential by the Committee in accordance with the Ethics in Government Act 1978, as amended.

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
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 and belief.		