1-800-325-8506

PERSONAL FINANCIAL STATEMENT FORM PFS **COVER SHEET** TOTAL NUMBER OF PAGES FILED: Filed in accordance with chapter 572 of the Government Code. For filings required in 2005, covering calendar year ending December 31, 2004. ACCOUNT # Use FORM PFS-INSTRUCTION GUIDE when completing this form. TITLE: FIRST; MI OFFICE USE ONLY NAME S. LUB NICKNAME; LAST; SUFFIX LEDLEFFINGWELL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2 ADDRESS 4001 BRADWOOD RD. AUSTIN, TX 78722 Receipt # HD / PM AREA CODE PHONE NUMBER; EXTENSION **TELEPHONE** Date Processed NUMBER (5/2) 458-4913 Date Imaged REASON CANDIDATE _____ FOR FILING **STATEMENT** ☐ ELECTED OFFICER ___ APPOINTED OFFICER _______ (INDICATE AGENCY) EXECUTIVE HEAD _______(INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR ______(INDICATE PARTY) Family members whose financial activity you are reporting (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity): MARY LOUMELAIN SPOUSE DEPENDENT CHILD 1. _____ In Parts 1 through 19, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

SOURCES OF OCCU	PATIONAL	. INCOME	PART 1A
NOTAPPLICABLE			
When reporting information about providing the number under which			he child about whom you are reporting by
1 INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD
EMPLOYMENT EMPLOYED BY ANOTHER		NAME AND ADDRESS O	OF EMPLOYER / POSITION HELD
☐ SELF-EMPLOYED		NATURE (OF OCCUPATION
INFORMATION RELATES TO	☐ FILER	SPOUSE	DEPENDENT CHILD
EMPLOYMENT	1201 Aus	NAME AND ADDRESS OF AN HEALTH CAR. W. 38 TM ST. TIN, TX 7870 GISTERBNURS	55
SELF-EMPLOYED			OF OCCUPATION
INFORMATION RELATES TO	☐ FILER	SPOUSE	DEPENDENT CHILD
EMPLOYMENT		NAME AND ADDRESS OF	FEMPLOYER / POSITION HELD
☐ EMPLOYED BY ANOTHER			
SELF-EMPLOYED		NATURE C	OF OCCUPATION
COPY AI	ND ATTACH AI	DDITIONAL PAGES A	S NECESSARY

RETAINERS

/	
NOTAPPLICABL	E

PART 1B

This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FEE RECEIVED FROM	NAME AND ADDRESS
FEE RECEIVED BY	NAME OF BUSINESS
	OR FILER
	OR SPOUSE'S BUSINESS
	DEPENDENT CHILD OR CHILD'S BUSINESS
FEE AMOUNT	☐ LESS THAN \$5,000 \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE
	NAME AND ADDRESS
FEE RECEIVED FROM	TOTAL PART PART OF THE PART OF
FEE RECEIVED BY	NAME OF BUSINESS
	☐ FiLER
	OR FILER'S BUSINESS
	☐ SPOUSE
	OR SPOUSE'S BUSINESS
	DEPENDENT CHILD
	OR CHILD'S BUSINESS
FEE AMOUNT	LESS THAN \$5,000 S5,000-\$9,999 S10,000-\$24,999 S25,000-OR MORE
COPY A	

NUMBER OF SHARES

IF SOLD

NET GAIN

☐ NET LOSS

100 TO 499

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ 10,000 OR MORE

LESS THAN 100 5,000 TO 9,999

LESS THAN \$5,000

500 TO 999

1,000 TO 4,999

STOCK					PART 2
☐ NOTAPPLI	CABLE				
and indicate the ca	ategory of the numb mount of the net	, your spouse, or a dep per of shares held or ac gain or loss realized	quired. If some or	r all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	TY	SONOCO	PROD.	AME	
² STOCK HELD OF	R ACQUIRED BY	E FILER	SPOUSE	DEPENDENT CHI	
3 NUMBER OF SH	ARES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	_
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 —\$24 ,999	☐ \$25,000—OR MORE
BUSINESS ENTI	ΓY	TOYS ALE	US N	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	ARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	■ NET GAIN ■ NET LOSS	LESS THAN \$5,000	\$5,000—\$9,999	\$10,000—\$24,999	☐ \$25,000-OR MORE
	☐ ME1 FO22				
BUSINESS ENTIT		ASTEC I	CNO N	AME	
BUSINESS ENTIT	TY	ASTEC I	SPOUSE	AME DEPENDENT CHIL	.D
	TY R ACQUIRED BY				_D
STOCK HELD OF	TY R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	
STOCK HELD OF	TY R ACQUIRED BY	FILER LESS THAN 100	SPOUSE	DEPENDENT CHIL	
STOCK HELD OF	R ACQUIRED BY ARES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL	☐ 1,000 TO 4,999
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 EE 310,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ FILER	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999 ☐ SPOUSE	DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ □
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999 ☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ □
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS R ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN NET GAIN NET GAIN	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000–\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000–\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ D ☐ 1,000 TO 4,999
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS RY ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000–\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000–\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OF NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHILD 500 TO 999 EE \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OF NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000—\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000—\$9,999 □ 15,000—\$9,999	DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D
STOCK HELD OF NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E DEPENDENT CHIL 500 TO 999 E	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D

STOCK					PART 2
☐ NOTAPPLIC	CABLE				
and indicate the ca	tegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	r all of the stock was	ring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	ΓΥ	DELTA	AIR LINE	AME S	
² STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	1 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 -\$24 ,999	\$25,000—OR MORE
BUSINESS ENTIT	ГҮ	GRAHAM	n CORP N	AME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHA	ARES	LESS THAN 100	₫ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	-
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000—OR MORE
BUSINESS ENTIT	ſΥ	HELMEICH	+ PAYNE	AME	
BUSINESS ENTIT		HELMEICH FILER	SPOUSE	DEPENDENT CHIL	.D
	ACQUIRED BY		+ PAYNE		
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	
STOCK HELD OR	ACQUIRED BY	FILER LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHIL	
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 E 15 \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	FILER	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 10,000 OR MOR ☐ \$5,000—\$9,999 ☐ SPOUSE	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN \$5,000 IMATION FILER LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000—\$9,999 □ SPOUSE □ 100 TO 499	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 // ATION FILER LESS THAN 100 5,000 TO 9,999	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000–\$9,999 □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000–\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000–\$9,999 □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000–\$9,999	DEPENDENT CHIL 500 TO 999 15 \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS Y ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS Y ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL DEPENDENT CHIL \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ARES	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL DEPENDENT CHIL \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ARES ACQUIRED BY ARES NET GAIN NET LOSS NET GAIN NET LOSS	FILER	□ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999

STOCK					PART 2
☐ NOTAPPLI	ICABLE		100000000		
and indicate the ca	ategory of the numb mount of the net	i, your spouse, or a depoer of shares held or ac gain or loss realized	equired. If some o	r all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the C		e child about whom	you are reporting by
¹ BUSINESS ENTI	TY	TIDEWA	TER INC	AME	
² STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	☐ DEPENDENT CHI	LD
³ NUMBER OF SH	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☑ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 RE	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000 - \$24,999	☐ \$25,000-OR MORE
BUSINESS ENTI	TY	TOYSR	U5 "	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SH	ARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTI	TY	MANAGED IL	A ACCUUNTS	AME TOCKS (#613	2-336882 EIDELITY
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTI	TY		N	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 - \$24,999	☐ \$25,000-OR MORE
BUSINESS ENTI	ТҮ		N	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
	COPY	AND ATTACH ADDITION	NAL PAGES AS NE	CESSARY	

DESCRIPTION

IF SOLD

OF INSTRUMENT

HELD OR ACQUIRED BY

☐ NET GAIN

☐ NET LOSS

Texas Ethics Commission F	P.O. Box 12070	Austin, Texas 7	8711-2070	(512) 463-58	800 1-800-325-850
BONDS, NOTES &	OTHER CO	MMERCIAL	. PAPE	R	PART 3
NOTAPPLICABLE					
List all bonds, notes, and other calendar year. If sold, indicate information, see FORM PFS-INS	the category of the	ne amount of the			
When reporting information ab providing the number under which				child about whom y	you are reporting by
1 DESCRIPTION	MANA	SED IRAA	cct c	ORPORATE B	sauss
OF INSTRUMENT	FIDEL	TY ACCT \$	+ 613-	-336882	
² HELD OR ACQUIRED BY	12 FILER	SPOUS	SE.	DEPENDENT CH	HILD
3 IF SOLD					
☐ NET GAIN	LESS THA	N \$5,000 🔲 \$5,00	0\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
☐ NET LOSS					
	MANAGE	O IRA AC	T TRO	DASURY NOTES	# BILLS
DESCRIPTION OF INSTRUMENT	FIDELI	TY ACCT #	613-	336882	
HELD OR ACQUIRED BY	12 Filer	☐ spous	E	DEPENDENT CH	IILD
IF SOLD					
□ NET GAIN	LESS THA	N \$5,000 🔲 \$5,000	5\$9,999	\$10,000-\$24,999	\$25,000OR MORE
NET LOSS	٠.				
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COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

FILER

FIDELITY ACCT # 613-336882

SPOUSE DEPENDENT CHILD _____

☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE

MUTUAL FUNDS				PART 4
NOTAPPLICABLE				
List each mutual fund and the num acquired during the calendar year a some or all of the shares of a mutual from the sale. For more information	and indicate the category fund were sold, also indi , see FORM PFS—INSTF	of the number of scate the category of RUCTION GUIDE.	shares of mutual fun of the amount of the n	ds held or acquired. If let gain or loss realized
When reporting information about providing the number under which t			e child about whom	you are reporting by
1 MUTUAL FUND	VARIOUS	NA	AME .	
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
OF MOTOALT CIND	☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
4 IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
MUTUAL FUND		NA.	ME	- 42 - 1.1.2 - WB - 1.1.2 - 1.1.2 - 1.1.2
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
OF MOTOALT STAD	□ 5,000 то 9,999	☐ 10,000 OR MOR	RE	
IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000 -\$24,999	S25,000-OR MORE
MUTUAL FUND		NA	ME	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
COF	Y AND ATTACH ADDITIO	NAL PAGES AS NE	CESSARY	

INCOME FROM INTE	REST, DIVIDE	ENDS, ROYA	LTIES & REN	NTS PART 5
NOTAPPLICABLE	1	•		
List each source of income you, y interest, dividends, royalties, and remore information, see FORM PFS—	ents during the calenda	r year and indicate the		
When reporting information about providing the number under which the state of the			e child about whom	you are reporting by
SOURCE OF INCOME	DELTA E HALTSFIE AT CANTA,	NAMEAN MPLUYEES LO-JACKSIN GA 30320	DADDRESS CREDIT UN ATL INTL	ARET
RECEIVED BY	FILER	SPOUSE	DEPENDENT (CHILD
3 AMOUNT	\$500-\$4,999	55,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
SOURCE OF INCOME	VELOCIT PO BOX AUSTIN,	NAMEAN Y CLEDIT U 1089 TK 78767	DADDRESS MION	
RECEIVED BY	4 Filer	SPOUSE	☐ DEPENDENT C	CHILD
AMOUNT	1 \$500-\$4,999	eee,e <i>\$</i> 000,2 <i>\$</i>	\$10,000 - \$24,999	☐ \$25,000OR MORE
SOURCE OF INCOME	FIDELIT	NAME AN	DADDRESS SE SELVICE	<u>s</u> su
RECEIVED BY	☐ FILER	SPOUSE	DEPENDENT C	:HILD
AMOUNT	\$500\$4,999	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
COPY A	ND ATTACH ADDIT	IONAL PAGES AS	NECESSARY	

PERSONAL NOTES AND LEASE AGREEMENTS PART 6 NOTAPPLICABLE Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. USAA/PHH MORTGAGE PERSON OR INSTITUTION 4001 LEDDENHALL RD. HOLDING NOTE OR MTLAUREL, NJ 08054 LEASE AGREEMENT LIABILITY OF FILER SPOUSE DEPENDENT CHILD _____ **GUARANTOR** SELF (Home mis.) **AMOUNT** \$5,000--\$9,999 \$10,000-\$24,999 \$25,000--OR MORE \$1,000--\$4,999 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF SPOUSE FILER DEPENDENT CHILD _____ **GUARANTOR AMOUNT** \$1,000--\$4,999 \$5,000--\$9,999 \$10,000-\$24,999 \$25,000--OR MORE PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF SPOUSE FILER ☐ DEPENDENT CHILD _____ **GUARANTOR AMOUNT** \$1,000--\$4,999 \$5,000--\$9,999 \$10,000-\$24,999 \$25,000-OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 Texas Ethics Commission P.O. Box 12070 INTERESTS IN REAL PROPERTY PART 7A NOTAPPLICABLE Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. HELD OR ACQUIRED BY FILER SPOUSE ■ DEPENDENT CHILD _ STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE STREET ADDRESS 4001 BRAD WOOD RD., BUSTIN, TX 78722 ■ NOT AVAILABLE DESCRIPTION LOTS - TRAVIS ACRES NAMES OF PERSONS SELF RETAINING AN INTEREST ■ NOT APPLICABLE (SEVERED MINERAL INTEREST) 5 IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ NET GAIN ☐ NET LOSS HELD OR ACQUIRED BY ☐ FILER SPOUSE DEPENDENT CHILD STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE STREET ADDRESS NOTAVAILABLE NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED DESCRIPTION LOTS ☐ ACRES NAMES OF PERSONS RETAINING AN INTEREST ■ NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000--OR MORE NET GAIN ☐ NET LOSS

Texas Ethics Commission

PART 7B INTERESTS IN BUSINESS ENTITIES NOTAPPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. HELD OR ACQUIRED BY SPOUSE ☐ FILER DEPENDENT CHILD _____ NAME AND ADDRESS **DESCRIPTION** 3 IF SOLD LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE ■ NET GAIN ☐ NET LOSS HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD ____ NAME AND ADDRESS DESCRIPTION IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE ☐ NET GAIN ☐ NET LOSS HELD OR ACQUIRED BY ☐ FILER SPOUSE DEPENDENT CHILD _____ NAME AND ADDRESS **DESCRIPTION** IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000--OR MORE ☐ NET GAIN ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Austin, Texas 78711-2070

TRUST INCOME

MOTAPPLICABLE

PART 9

Identify each source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received more than \$500 in income, if the identity of the asset is known. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

SOURCE	DELTA PICOTS LOTICEMENT TRUS PO BOX 20706 ATLANTA, GA 30320	T (PENSION)
² BENEFICIARY	FILER SPOUSE DEPENDENT CHILD	
INCOME	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000-\$24,999 ☐ \$2	5,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED		
SOURCE	DEPT OF DEFENSE FINANCE FACCT. (PENS	10~)
BENEFICIARY	FILER SPOUSE DEPENDENT CHILD	
INCOME	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000-\$24,999 ☐ \$2	5,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED UNKNOWN		
SOURCE	SOCIAL SECURITY (PENSION)	
BENEFICIARY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _	
INCOME	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25	5,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED		
UNKNOWN		
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY	

P.O. Box 12070

TRUSTEE STATEMENT

P.O. Box 1,2070

PART 10B

7	NOTAPPLICABLE	c
10	HO I AI I FIGADE	_

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

	Trustee Signature
4 TRUSTEE STATEMENT	I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.
3 FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
2 TRUSTEE NAME	
1 NAME OF TRUST	

§ 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
 - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;
 - (14) identification of each blind trust that complies with Subsection (c), including:
 - (A) the category of the fair market value of the trust;
 - (B) the date the trust was created;
 - (C) the name and address of the trustee; and
 - (D) a statement signed by the trustee, under penalty of perjury, stating that:
 - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
 - (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
 - (1) the trustee:
 - (A) is a disinterested party;
 - (B) is not the individual;
 - (C) is not required to register as a lobbyist under Chapter 305;
 - (D) is not a public officer or public employee; and
 - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
 - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

NOTAPPLICABLE				
Describe all assets of each corporation, professional adent child held, acquired, of the assets. For more info	association, joint ventul or sold 50 percent or mo ormation, see FORM P	re, or other business as ore of the outstanding ov FS-INSTRUCTION GU	sociation in which you, young whership and indicate the of the line.	ur spouse, or a depen- category of the amount
When reporting information providing the number under the			te the child about whom	you are reporting by
1 BUSINESS ASSOCIATION		NAME AN	ID ADDRESS	
² BUSINESS TYPE				
3 HELD, ACQUIRED, OR SOLD BY	☐ FiLER	SPOUSE	☐ DEPENDENT	CHILD
4 ASSETS	DES	CRIPTION	CATE	GORY
			LESS THAN \$5,000	\$5,000\$9,999
			\$10,000\$24,999	\$25,000OR MORE
			LESS THAN \$5,000	\$5,000 \$ 9,999
			\$10,000-\$24,999	☐ \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999
			\$10,000-\$24,999	☐ \$25,000OR MORE
		• • • • • • • • • • • • • • • • • • • •	! _	
			LESS THAN \$5,000	5 ,000\$9,999
			\$10,000-\$24,999	☐ \$25,000OR MORE
			LESS THAN \$5,000	\$5,000 - \$9,999
			1 _	
			\$10,000-\$24,999	\$25,000OR MORE
	!		LESS THAN \$5,000	\$5,000-\$9,999
			\$10,000\$24,999	\$25,000OR MORE
			1	
			LESS THAN \$5,000	\$5,000\$9,999
			\$10,000-\$24,999	\$25,000-OR MORE
				55,000-\$9,999
		·	\$10,000-\$24,999	☐ \$25,000OR MORE
C	OPY AND ATTACH	ADDITIONAL PAGES	S AS NECESSARY	

LIABILITIES OF BUSINESS ASSOCIATIONS PART 11B

NOTAPPLICABLE

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

providing the number dide	er which the child is list	ed on the Cover Sheet.		
BUSINESS ASSOCIATION		NAMÉ AND	ADDRESS	
² BUSINESS TYPE				
3 HELD, ACQUIRED, OR SOLD BY	☐ FILER	SPOUSE	_ DEPENDENT	CHILD ——
4 LIABILITIES	DESI	CRIPTION	CATE LESS THAN \$5,000 S10,000-\$24,999	\$5,000-\$9,999
			LESS THAN \$5,000	□ \$5,000\$9,999 □ \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000	\$5,000-\$9,999
			LESS THAN \$5,000	\$5,000~\$9,999
		ADDITIONAL PAGES	LESS THAN \$5,000	\$5,000—\$9,999

BOARDS AND EXECUTIVE POSITIONS

PART 12

 /			
NO	TAPP	ICAR	۱F

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS—INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

providing the number tinde	. Which the ormale her		
¹ ORGANIZATION	FAMIL	y ELDER CAR	E (NON-PROFIT)
POSITION HELD	PRESIO	ENT OF BOARD	OF DIRECTORS
³ POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD		·	
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
C	OPY AND ATTACH	ADDITIONAL PAGES	AS NECESSARY

AMOUNT

P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 Texas Ethics Commission **PART 13** EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION NOTAPPLICABLE Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS-INSTRUCTION GUIDE. NAME AND ADDRESS **PROVIDER** ² AMOUNT NAME AND ADDRESS **PROVIDER AMOUNT** NAME AND ADDRESS **PROVIDER AMOUNT** NAME AND ADDRESS **PROVIDER**

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 INTEREST IN BUSINESS IN COMMON WITH LOBBYIST **PART 14** NOTAPPLICABLE Identify each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association, other than a publicly-held corporation, in which you, your spouse, or a dependent child, and a person registered as a lobbyist under chapter 305 of the Government Code that both have an interest. For more information, see FORM PFS-INSTRUCTION GUIDE. NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY ☐ FILER SPOUSE ☐ DEPENDENT CHILD _____ NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY ☐ FILER SPOUSE DEPENDENT CHILD _____ NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY FILER SPOUSE DEPENDENT CHILD _____ NAME AND ADDRESS **BUSINESS ENTITY** ☐ FILER SPOUSE INTEREST HELD BY ☐ DEPENDENT CHILD _____ NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY ☐ FILER SPOUSE DEPENDENT CHILD _____

EEES RECEIVED FOR SERVICES RENDERED

TO A LOBBYIST OR L				PART 15
Report any fee you received for provi chapter 305 of the Government Code, sates or reimburses a person required services were provided, and indicate INSTRUCTION GUIDE.	or for providing services I to be registered as a lo	to or on behalf of a bbyist. Report the	person you actually name of each perso	know directly compen- n or entity for which the
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	55,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000 -\$24,999	\$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	-			
FEE CATEGORY	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 - \$24,999	\$25,000-OR MORE
COPY AN	ID ATTACH ADDITIO	NAL PAGES AS	NECESSARY	

Texas Ethics Commission P.C). Box 12070 A	ustin, <u>Texas</u> 78711-20	70 (512) 463	5800 1-800-325-850
REPRESENTATION STATE AGENCY	BY LEGISLA	TOR BEFORE	E	PART 16
NOTAPPLICABLE				
This section applies only to member for compensation before a state name of the person represented, a information, see FORM PFS-INSTE Note: Beginning September 1, 20 agency in the executive branch. The relationship in a criminal law matter; on the part of the agency; or (3) the September 1, 2003.	e agency in the exemple and the category of the RUCTION GUIDE. 203, legislators may reprohibition does not (2) the representation	ecutive branch must ne amount of the feet not, for compensation, at apply if: (1) the repre- n involves the filing of co	t provide the name received for the repr , represent another p esentation is pursuan documents that involv	e of the agency, the esentation. For more person before a state at to an attorney/client re only ministerial acts
1 STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,	,000	\$10,000-\$24,999	☐ \$25,000OR MORE
STATE AGENCY				
PERSON REPRESENTED			. •	
FEE CATEGORY	LESS THAN \$5,	000 🗌 \$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5.	000	\$10,000-\$24,999	\$25,000OR MORE
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,	9,999	\$10,000-\$24,999	\$25,000OR MORE

PART **17**

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

NOTAPPLICABLE

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS—INSTRUCTION GUIDE.

SOURCE OF BENEFIT	NAME AND ADDRESS
² BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	

REFERRALS		PART 19
NOTAPPLICABL	LE	
A state officer who services and the cate	is also an attorney must report making or rece egory of the amount of the fee. For more informat	iving any referral for compensation for legal ion, see FORM PFS-INSTRUCTION GUIDE.
1 SOURCE		
² CHECK ONE		
RECEIVED REFERRAL	LESS THAN \$5,000	☐ AT LEAST \$10,000, BUT LESS THAN \$25,000
MADE REFERRAL	AT LEAST \$5,000, BUT LESS THAN \$10,000	☐ \$25,000 OR MORE
SOURCE		
CHECK ONE		
RECEIVED REFERRAL	LESS THAN \$5,000	☐ AT LEAST \$10,000, BUT LESS THAN \$25,000
☐ MADE REFERRAL	☐ AT LEAST \$5,000, BUT LESS THAN \$10,000	\$25,000 OR MORE
SOURCE		
CHECKONE		
RECEIVED REFERRAL	LESS THAN \$5,000	☐ AT LEAST \$10,000, BUT LESS THAN \$25,000
☐ MADE REFERRAL	AT LEAST \$5,000, BUT LESS THAN \$10,000	\$25,000 OR MORE
SOURCE		
CHECK ONE		
RECEIVED REFERRAL	LESS THAN \$5,000	AT LEAST \$10,000, BUT LESS THAN \$25,000
☐ MADE REFERRAL	AT LEAST \$5,000, BUT LESS THAN \$10,000	\$25,000 OR MORE
	COPY AND ATTACH ADDITIONAL PA	GES AS NECESSARY

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

P.O. Box 12070

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

> I swear, or affirm, that my financial statement is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

AFFIX NOTARY STAMP / SE	ALAPOVE
ı	ROSEMARY YBARRA
•	NOTARY PUBLIC
	State of Texas
	Comm. Exp. 12-12-2006

Sworn to and subscribed before me, b	y the said S. Lee Leffingwall	this the <u>2844</u> day of
March 20 05	, to certify which, witness my hand and se	al of office.
	0	2 1
Joseman Jana	Rosemany Ibanne	Notary Public
Signature of officer administering cath	Print name of officer administering oath	Title of officer administering oath

1-800-325-8506 PERSONAL FINANCIAL STATEMENT FORM PFS 06 ATT 23 PH 1: 37 **COVER SHEET** TOTAL NUMBER OF PAGES FILED: Filed in accordance with chapter 572 of the Government Code. For filings required in 2006, covering calendar year ending December 31, 2005. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. TITLE; FIRST; MI OFFICE USE ONLY NAME Date Received LEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2 ADDRESS city of Pustin Receipt # HD / PM Amount AREA CODE **TELEPHONE** PHONE NUMBER; EXTENSION Date Processed NUMBER (512) 974-2260 Date Imaged REASON FOR FILING DELECTED OFFICER About City Consoil Place 1 (INDICATE OFFICE) STATEMENT APPOINTED OFFICER _______(INDICATE AGENCY) EXECUTIVE HEAD ________(INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT ☐ STATE PARTY CHAIR ______ (INDICATE PARTY) OTHER _____(INDICATE POSITION) Family members whose financial activity you are reporting (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity): SPOUSE _ DEPENDENT CHILD 1. In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control

over that person's financial activity.

RETAINERS PART 1B NOTAPPLICABLE This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS FEE RECEIVED FROM 2 NAME OF BUSINESS FEE RECEIVED BY ☐ FILER OR FILER'S BUSINESS . ☐ SPOUSE OR SPOUSE'S BUSINESS ___ ☐ DEPENDENT CHILD OR CHILD'S BUSINESS **FEE AMOUNT** ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE NAME AND ADDRESS FEE RECEIVED FROM NAME OF BUSINESS FEE RECEIVED BY OR FILER'S BUSINESS ___ SPOUSE OR SPOUSE'S BUSINESS -☐ DEPENDENT CHILD OR CHILD'S BUSINESS **FEE AMOUNT** ☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

LESS THAN \$5,000

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ NET LOSS

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

STOCK					PART 2
NOTAPPLI	ICABLE				
and indicate the ca	ategory of the numb mount of the net	i, your spouse, or a dep per of shares held or ac gain or loss realized	quired. If some of	r all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	TY	CLARK	· 1200	AME	
² STOCK HELD OF	R ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SH	ARES	LESS THAN 100	□ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTI	TY	DELTA A	IIR LINE	AME 	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☒ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTI	ΤΥ	DOM JON	UES+C.	AME)	
BUSINESS ENTI		DOW JON	UES+CO		LD
	R ACQUIRED BY		<u> 125+C</u> 0	<u> </u>	LD
STOCK HELD OF	R ACQUIRED BY	∏ FILER —	UES+CO	DEPENDENT CHIL	
STOCK HELD OF	R ACQUIRED BY	☐ LESS THAN 100	UES + C C ☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL	
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100☐ 5,000 TO 9,999☐	UES + C C ☐ SPOUSE ☐ 10,000 OR MOR ☐ \$5,000-\$9,999	DEPENDENT CHII	☐ 1,000 TO 4,999
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	UES + C C ☐ SPOUSE ☐ 10,000 OR MOR ☐ \$5,000-\$9,999	DEPENDENT CHII 500 TO 999 500 TO 999 500 TO 999	☐ 1,000 TO 4,999
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 GRAINGE	UES + C C □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 GRAINGE	UES + C C □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ R W W □ SPOUSE	DEPENDENT CHILD DEPENDENT CHILD 500 TO 999 SME DEPENDENT CHILD 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	FILER	UES + C C □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 100 TO 499	DEPENDENT CHILD DEPENDENT CHILD 500 TO 999 SME DEPENDENT CHILD 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 CRAINGE STEER LESS THAN 100 5,000 TO 9,999	□ SPOUSE □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHILD DEPENDENT CHILD \$10,000\$24,999 DEPENDENT CHILD 500 TO 999 E	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF NUMBER OF SHA IF SOLD	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY	FILER	□ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHILD 500 TO 999 15 \$10,000\$24,999 MME DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE _D ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY R ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER	UES + CC □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHII 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE _D ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY R ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER	□ SPOUSE □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ \$5,000-\$9,999	DEPENDENT CHIL DEPENDENT CHIL \$10,000\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY R ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER	□ SPOUSE □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ SPOUSE □ SPOUSE	DEPENDENT CHIL DEPENDENT CHIL \$10,000\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ 1,000 TO 4,999

Texas Ethics Commission

PART 2 STOCK NOTAPPLICABLE List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 BUSINESS ENTITY KIMBERLY CLARK CORP ² STOCK HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD . ☐ 500 TO 999 1,000 TO 4,999 100 TO 499 3 NUMBER OF SHARES LESS THAN 100 ☐ 10,000 OR MORE 5,000 TO 9,999 4 IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000-\$9,999 \$10,000--\$24,999 \$25,000--OR MORE □ NET LOSS **BUSINESS ENTITY** MANPOWER INC STOCK HELD OR ACQUIRED BY SPOUSE ☐ DEPENDENT CHILD **FILER** LESS THAN 100 M 100 TO 499 ☐ 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES 5,000 TO 9,999 ☐ 10,000 OR MORE IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE ☐ NET LOSS **BUSINESS ENTITY** NEWELL RUBBERMAID INC ☐ DEPENDENT CHILD STOCK HELD OR ACQUIRED BY SPOUSE ☑ FILER **100 TO 499** ☐ 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES LESS THAN 100 ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS **BUSINESS ENTITY** POWELL INDS INC STOCK HELD OR ACQUIRED BY ☑ FILER SPOUSE DEPENDENT CHILD 1,000 TO 4.999 √100 TO 499 ☐ 500 TO 999 NUMBER OF SHARES LESS THAN 100 ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD ■ NET GAIN \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE LESS THAN \$5,000 ☐ NET LOSS **BUSINESS ENTITY** ROBBINS+MYERS INC STOCK HELD OR ACQUIRED BY TX FILER SPOUSE DEPENDENT CHILD ☐ 500 TO 999 NUMBER OF SHARES LESS THAN 100 M 100 TO 499 1,000 TO 4,999 5,000 TO 9,999 ☐ 10,000 OR MORE IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS

P.O. Box 12070

STOCK				PART 2
NOTAPPLICABLE				
List each business entity in which y and indicate the category of the nucleategory of the amount of the number INSTRUCTION GUIDE.	mber of shares held or a	cquired. If some o	r all of the stock was	sold, also indicate the
When reporting information about providing the number under which t	a dependent child's a he child is listed on the C	ctivity, indicate the cover Sheet.	e child about whom	you are reporting by
1 BUSINESS ENTITY	SPX CO	RP	IAME	
² STOCK HELD OR ACQUIRED BY	✓ ☐ FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	1,000 TO 4,999
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000-OR MORE
BUSINESS ENTITY	SEAGAT	E TECHN	AME OLOGY	
STOCK HELD OR ACQUIRED BY	/ X FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHARES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
	☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTITY	WAL-MA		ES INC	
				_D
BUSINESS ENTITY	FILER LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHIL	_D 1,000 TO 4,999
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BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	LESS THAN 100	RT STOR € □ SPOUSE □ 100 TO 499 □ 10,000 OR MOF □ \$5,000-\$9,999	DEPENDENT CHII DEPENDENT CHII 500 TO 999 RE \$10,000\$24,999	☐ 1,000 TO 4,999
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BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ HELMRICH	RT STOR (□ SPOUSE □ 10,000 OR MOF □ \$5,000—\$9,999 □ + PAYN (□ SPOUSE	DEPENDENT CHILD	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 HELMRICH FILER LESS THAN 100	SPOUSE SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 + PAYNO	DEPENDENT CHILD	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
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BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 HELMRICH FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 TRANSOC	SPOUSE SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 + PAYNO SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHILD DEPENDENT CHILD DEPENDENT CHILD S10,000\$24,999 DEPENDENT CHILD DEPENDENT CHILD S00 TO 999 EE S10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
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STOCK					PART 2
☐ NOTAPPLIC	CABLE				
and indicate the ca	tegory of the number mount of the net		equired. If some o	r all of the stock was	ring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the C		e child about whom	you are reporting by
1 BUSINESS ENTIT	ΓΥ	TIDEWAT		AME	
² STOCK HELD OF	R ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHI	LD
³ NUMBER OF SHARES		☐ LESS THAN 100 ☐ 5,000 TO 9,999		☐ 500 TO 999 RE	☐ 1,000 TO 4,999
4 IF SOLD	M NET GAIN ☐ NET LOSS	⊠ LESS THAN \$5,000	\$5,000-\$9,999	S10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTITY		MANAGED IRA ACCOUNT STOCKS (FIDELITY)			
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	10,000 OR MOF	RE	
IF SOLD	☑ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000—OR MORE
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BUSINESS ENTIT	Y	ASTEC I		AME DEPENDENT CHIL	-D
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STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	 ○ D □ SPOUSE ☑ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 	☐ DEPENDENT CHII ☐ 500 TO 999 RE ☐ \$10,000\$24,999	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	○ D	☐ DEPENDENT CHIL ☐ 500 TO 999 RE ☐ \$10,000\$24,999	☐ 1,000 TO 4,999
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STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ RAHAM ☐ FILER ☐ LESS THAN 100	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ CORP □ SPOUSE □ 100 TO 499	DEPENDENT CHIL	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ CAHAM ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 EE \$10,000\$24,999 MME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ D ☐ 1,000 TO 4,999
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■ NET GAIN

☐ NET LOSS

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE

Texas Ethics Commiss	sion P.O. B	ox 12070 Austir	, Texas 78711-20	70 (512) 463-	5800 1-800-325-8506
MUTUAL FL	JNDS	•			PART 4
NOTAPPLIC	CABLE				
acquired during the some or all of the sh from the sale. For n When reporting inf	List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.				
1 MUTUAL FUND	er under wnich the	child is listed on the C		 AME	
MOTORET CRE					
² SHARES OF MUTU HELD OR ACQUIR		FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHAR OF MUTUAL FUND		LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
OF MOTORET ONE		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
4 IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
	☐ NET LOSS	<u></u>			
MUTUAL FUND		-	NA	ME	
MUTUAL FUND	NET LOSS		NA	ME	
MUTUAL FUND SHARES OF MUTU HELD OR ACQUIRE	AL FUND	FILER	NA	ME DEPENDENT CHIL	LD
SHARES OF MUTU HELD OR ACQUIRE NUMBER OF SHAR	AL FUND ED BY	☐ FILER ☐ LESS THAN 100			LD
SHARES OF MUTU HELD OR ACQUIRE	AL FUND ED BY		SPOUSE	DEPENDENT CHIL	<u> </u>
SHARES OF MUTU HELD OR ACQUIRE NUMBER OF SHAR	AL FUND ED BY	LESS THAN 100	☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL	☐ 1,000 TO 4,999
SHARES OF MUTU HELD OR ACQUIRE NUMBER OF SHAR OF MUTUAL FUND	AL FUND ED BY RES	☐ LESS THAN 100	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR	☐ DEPENDENT CHIL ☐ 500 TO 999 EE ☐ \$10,000\$24,999	☐ 1,000 TO 4,999
SHARES OF MUTU HELD OR ACQUIRE NUMBER OF SHAR OF MUTUAL FUND IF SOLD	AL FUND ED BY RES	☐ LESS THAN 100	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000-\$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 EE ☐ \$10,000\$24,999	☐ 1,000 TO 4,999
SHARES OF MUTU HELD OR ACQUIRE NUMBER OF SHAR OF MUTUAL FUND IF SOLD	AL FUND ED BY RES NET GAIN NET LOSS AL FUND	☐ LESS THAN 100	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000-\$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 EE ☐ \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
SHARES OF MUTU HELD OR ACQUIRE NUMBER OF SHAR OF MUTUAL FUND IF SOLD MUTUAL FUND	AL FUND ED BY RES NET GAIN NET LOSS AL FUND ED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE

☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000--OR MORE

IF SOLD

NET GAIN

☐ NET LOSS

P.O. Box 12070

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5 NOTAPPLICABLE List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS SOURCE OF INCOME DELTA EMPLOYEES CREDIT UNION HARTSFIELD-JACKSON ATLINTL ARPT ATLANTA, GA 30320 ² RECEIVED BY FILER SPOUSE ☐ DEPENDENT CHILD _____ **AMOUNT** \$500-\$4,999 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME VELOCITY CREDIT UNION P. O. BOX 1089 AUSTIN, TX 78767 RECEIVED BY FILER SPOUSE ☐ DEPENDENT CHILD _____ **AMOUNT** \$500-\$4,999 □ \$5,000--\$9,999 □ \$10,000--\$24,999 □ \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME RECEIVED BY ☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ **AMOUNT** \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE \$500--\$4,999 COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS PART 6 NOTAPPLICABLE Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF SPOUSE DEPENDENT CHILD _____ FILER **GUARANTOR AMOUNT** \$1,000--\$4,999 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000-OR MORE PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF ☐ SPOUSE ☐ FILER DEPENDENT CHILD _____ **GUARANTOR** \$1,000--\$4,999 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE **AMOUNT** PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ **GUARANTOR** □ \$5,000--\$9,999 □ \$10,000--\$24,999 □ \$25,000--OR MORE **AMOUNT** \$1,000--\$4,999 COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

(512) 463-5800

INTERESTS IN REAL	. PROPERTY PART 7A		
NOTAPPLICABLE			
calendar year. If the interest was so For an explanation of "beneficial in INSTRUCTION GUIDE.	real property held or acquired by you, your spouse, or a dependent child during the ld, also indicate the category of the amount of the net gain or loss realized from the sale. nterest" and other specific directions for completing this section, see FORM PFS		
	a dependent child's activity, indicate the child about whom you are reporting by he child is listed on the Cover Sheet.		
1 HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD		
STREET ADDRESS NOT AVAILABLE	4516 W. Roleanes including city, county, and state Austin. Texas		
DESCRIPTION ☐ LOTS ☐ ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED		
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000OR MORE		
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD		
STREET ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE HOO! Brade of North of		
DESCRIPTION 6 LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED		
NAMES OF PERSONS RETAINING AN INTEREST OT APPLICABLE (SEVERED MINERAL INTEREST)			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY			

KUNKNOWN

BLIND TRUSTS			PART 10A	
NOTAPPLICABLE				
Identify each blind trust that complies with section 572.023(c) of the Government Code. See FORM PFSINSTRUCTION GUIDE.				
	out a dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet.			
1 NAME OF TRUST				
² TRUSTEE		NAME AT	ND ADDRESS	
3 BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD	
⁴ FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000~\$9,999	☐ \$10,000\$24,999 ☐ \$25,000-OR MORE	
DATE CREATED				
NAME OF TRUST				
TRUSTEE		NAME AF	ND ADDRESS	
BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000 \$ 9,999	\$10,000\$24,999 \$25,000OR MORE	
DATE CREATED				
NAME OF TRUST				
TRUSTEE		NAME AN	ID ADDRESS	
BENEFICIARY	FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE	
DATE CREATED				
COPY A	ND ATTACH ADDITIO	NAL PAGES AS	NECESSARY	

TRUSTEE STATEMENT

PART 10B

Γ	NOTAPPLICAB	LΕ

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1	NAME OF TRUST	
2	TRUSTEE NAME	
3	FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
4	TRUSTEE STATEMENT	Laffirm, under penalty of periury, that I have not revealed any information to the beneficiary of this

I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.

Trustee Signature

§ 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
 - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500:
 - (14) identification of each blind trust that complies with Subsection (c), including:
 - (A) the category of the fair market value of the trust;
 - (B) the date the trust was created;
 - (C) the name and address of the trustee; and
 - (D) a statement signed by the trustee, under penalty of perjury, stating that:
 - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
 - (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
 - (1) the trustee:
 - (A) is a disinterested party;
 - (B) is not the individual:
 - (C) is not required to register as a lobbyist under Chapter 305;
 - (D) is not a public officer or public employee; and
 - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
 - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

PART 11A

P.O. Box 12070

ASSETS OF BUSINESS ASSOCIATIONS NOTAPPLICABLE Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS BUSINESS ASSOCIATION **BUSINESS TYPE** 3 HELD, ACQUIRED, ☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD — OR SOLD BY DESCRIPTION CATEGORY **ASSETS** LESS THAN \$5,000 \$5,000--\$9,999 \$25,000--OR MORE 10,000--\$24,999 ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 ☐ \$25,000--OR MORE LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 **\$10,000--\$24,999** ☐ \$25,000--OR MORE LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 10,000--\$24,999 ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 **\$10,000--\$24,999** ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

\$25,000--OR MORE

\$10,000--\$24,999

(512) 463-5800 1-800-325-8506 Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 PART 11B LIABILITIES OF BUSINESS ASSOCIATIONS NOTAPPLICABLE Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS BUSINESS **ASSOCIATION BUSINESS TYPE** 3 HELD, ACQUIRED, ☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD — OR SOLD BY CATEGORY DESCRIPTION LIABILITIES ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE LESS THAN \$5,000 \$5,000--\$9,999 \$10,000-\$24,999 ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 ☐ \$25,000--OR MORE \$5,000--\$9,999 ☐ LESS THAN \$5,000 \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000-\$24,999 \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

(512) 463-5800

P.O. Box 12070

BOARDS AND EXECUTIVE POSITIONS PART 12 NOTAPPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **ORGANIZATION** POSITION HELD POSITION HELD BY ☐ FILER SPOUSE DEPENDENT CHILD _____ **ORGANIZATION** POSITION HELD POSITION HELD BY ☐ FILER ☐ SPOUSE DEPENDENT CHILD ___ **ORGANIZATION** POSITION HELD POSITION HELD BY FILER ☐ SPOUSE DEPENDENT CHILD ___ **ORGANIZATION POSITION HELD** ☐ FILER SPOUSE POSITION HELD BY □ DEPENDENT CHILD **ORGANIZATION** POSITION HELD POSITION HELD BY ☐ FILER SPOUSE DEPENDENT CHILD ____ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

AMOUNT

PROVIDER

AMOUNT

1-800-325-8506 Texas Ethics Commission P.O. Box 12070 (512) 463-5800 Austin, Texas 78711-2070 EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION PART 13 NOTAPPLICABLE Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE. NAME AND ADDRESS **PROVIDER AMOUNT** NAME AND ADDRESS **PROVIDER AMOUNT** NAME AND ADDRESS **PROVIDER**

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

NAME AND ADDRESS

INTEREST IN BUSIN	ESS IN COM	IMON WITH LO	OBBYIST PART 14	
NOTAPPLICABLE				
sional association, joint venture, or	other business ass person registered as	sociation, other than a page a lobbyist under chapte	partnership, professional corporation, profes- publicly-held corporation, in which you, your er 305 of the Government Code that both have	
1 BUSINESS ENTITY		NAME A	ND ADDRESS	
² INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME A	ND ADDRESS	
INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME AN	ND ADDRESS	
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME AN	ND ADDRESS	
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME AN	D ADDRESS	
INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 **Texas Ethics Commission** FEES RECEIVED FOR SERVICES RENDERED **PART 15** TO A LOBBYIST OR LOBBYIST'S EMPLOYER NOTAPPLICABLE Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS--INSTRUCTION GUIDE. PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED **FEE CATEGORY** ☐ LESS THAN \$5.000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED **FEE CATEGORY** ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED EEE CATECORY

FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999 	\$10,000\$24,999	\$25,000-OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

REPRESENTATION BY LEGISLATOR BEFORE STATE AGENCY

PART 16

1-800-325-8506

NOTAPPLICABLE

Texas Ethics Commission

This section applies only to members of the Texas Legislature. Amember of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS--INSTRUCTION GUIDE.

Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerial acts on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003.

1 STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
STATE AGENCY	•
PERSON REPRESENTED	
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
COPY AN	ID ATTACH ADDITIONAL PAGES AS NECESSARY

BENEFITS DERIVED FROM FUNCTIONS HONORING **PUBLIC SERVANT**

P.O. Box 12070

PART 17

X	NOT	APPL	ICABL	E
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Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS--INSTRUCTION GUIDE.

SOURCE OF BENEFIT	. NAME AND ADDRESS
2 BENEFIT	
·	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
C	OPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

LEGISLATIVE CON	TINUANCES	5		PART 18
Identify any legislative continu and Remedies Code, or unde grounds that an attorney for a	er another law or ru	ile that requires or peri	mits a court to grant contin	e Civil Practice uances on the
NAME OF PARTY REPRESENTED				
DATE RETAINED				
3 STYLE, CAUSE NUMBER, COURT & JURISDICTION				
DATE OF CONTINUANCE APPLICATION				
WAS CONTINUANCE GRANTED?	☐ YES	□ NO .		
NAME OF PARTY REPRESENTED				
DATE RETAINED				
STYLE, CAUSE NUMBER, COURT, & JURISDICTION				
DATE OF CONTINUANCE APPLICATION		`		
WAS CONTINUANCE GRANTED?	☐ YES	□ NO		· .
СОРУ	AND ATTACH A	DDITIONAL PAGES	AS NECESSARY	

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

> I swear, or affirm, that my financial statement is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.



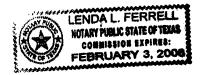


Sworn to and subscribed before me, by the said <u>Lee Leffingwall</u>, this the <u>2811</u> day of <u>April</u>, 20 <u>Ok</u>, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Well Lenda Ferrell Notary Public
Print name of officer administering oath

Title of officer administering oath



PERSONAL FINANCIAL STATEMENT

FORM PFS COVER SHEET

File al	in accordance with the protect F70 of the Consumer of Code	TOTAL NUMBER OF PA	GES FILED:	
Filed in accordance with chapter 572 of the Government Code. For filings required in 2007, covering calendar year ending December 31, 2006. Use FORM PFSINSTRUCTION GUIDE when completing this form.		ACCOUNT #		
1 NAME	TITLE; FIRST; MI	OFFICE	USE ONLY	
•	LEE NICKNAME, LAST, SUFFIX LEFFINGWELL	Date Received	POSTING I	
2 ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE CITY OF AUSTIN 301 W. 2nd St. AUSTIN, TX 78701	Receipt #	DATE/TIM 6 PM 2	
³ TELEPHONE	AREA CODE PHONE NUMBER; EXTENSION	HD/PM	Amount	
NUMBER	(512) 974-2260	Date Imaged		
4 REASON FOR FILING STATEMENT	□ CANDIDATE □ CANDIDATE □ APPOINTED OFFICER □ EXECUTIVE HEAD □ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT □ STATE PARTY CHAIR □ OTHER	CE ((INDICATE OFFICE) (INDICATE AGENCY) (INDICATE AGENCY) (INDICATE PARTY)	
	whose financial activity you are reporting (filer must report information about the if the filer had actual control over that activity):		. '	
SPOUSE	JULIE BYERS			
DEPENDENT (CHILD 1			
	2			
	3			

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

P.O. Box 12070

SOURCES OF OCCU	PATIONAL	INCOME	PART 1A
NOTAPPLICABLE			
When reporting information about providing the number under which			he child about whom you are reporting by
1 INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD.
2 EMPLOYMENT		NAME AND ADDRESS O	OF EMPLOYER / POSITION HELD
EMPLOYED BY ANOTHER	3011	OF AUSTIN W. 2nd. Stre IIN, TX 7870	
SELF-EMPLOYED	C.IT.Y.	COUNCIL ME	MBER OF OCCUPATION
INFORMATION RELATES TO	☐ FILER	SPOUSE	DEPENDENT CHILD
EMPLOYMENT		NAME AND ADDRESS C	OF EMPLOYER / POSITION HELD
☐ EMPLOYED BY ANOTHER	11113	on Northwest B Research B TIN, TX 7875	Slvd.
SELF-EMPLOYED	Regi	stered Nurse	OF OCCUPATION
INFORMATION RELATES TO	☐ FILER	SPOUSE	DEPENDENT CHILD
EMPLOYMENT		NAME AND ADDRESS O	F EMPLOYER / POSITION HELD
EMPLOYED BY ANOTHER			
SELF-EMPLOYED		NATURE (OF OCCUPATION
COPY A	ND ATTACH A	DDITIONAL PAGES A	AS NECESSARY

RETAINERS

PART 1B

X	NOTAPPLICABLI
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This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet

providing the number ander which	
1 FEE RECEIVED FROM	NAME AND ADDRESS
FEE RECEIVED BY	NAME OF BUSINESS
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3 FEE AMOUNT	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
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CORY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission

STOCK			3 *	•	PART 2
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1 BUSINESS ENTIT	Y			AME	
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STOCK					PART 2
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and indicate the ca	tegory of the numb mount of the net	, your spouse, or a der per of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	ΓΥ	CDW C	ORP	AME	
² STOCK HELD OF	ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHI	LD
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STOCK					PART 2
NOTAPPLICABLE					
List each business entity is and indicate the category category of the amount INSTRUCTION GUIDE.	of the numb	er of shares held or ac	equired. If some or	r all of the stock was	sold, also indicate the
When reporting informati providing the number und				child about whom	you are reporting by
¹ BUSINESS ENTITY		DIXIE 67		AME :	
² STOCK HELD OR ACQU	UIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHARES		☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	⊠ 500 TO 999	☐ 1,000 TO 4,999
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IF SOLD

☐ NET GAIN

☐ NET LOSS

LESS THAN \$5,000

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

Texas Ethics Commission

STOCK					PART 2
NOTAPPLK	CABLE				
and indicate the ca	tegory of the number nount of the net	per of shares held or ac	cquired. If some o	r all of the stock was	uring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the C		e child about whom	you are reporting by
¹ BUSINESS ENTIT	ΓΥ	IMATION	CORP	AME	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	500 TO 999	1,000 TO 4,999
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		KELLWOOD D			
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	≥ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE .	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	Υ .	34		AME ·	
STOCK HELD OR	ACQUIRED BY	KIMBERLY SFILER	CLARK SPOUSE	DEPENDENT CHIL	<u> </u>
			☐ 100 TO 499	№ 500 TO 999	
NUMBER OF SHA	AKES	LI LESS THAN 100	100 10 499		1,000 TO 4,999
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Y		N/	AME	
DOGINE GO E		LA Z BOY	INC		
STOCK HELD OR	ACQUIRED BY	₩ FILER	SPOUSE	DEPENDENT CHIL	-D
111 11 15 ED OF OU			— /		_
NUMBER OF SHA	ARES	LESS THAN 100	1 00 TO 499	☐ 500 TO 999	1,000 TO 4,999
NUMBER OF SHA	ARES 	LESS THAN 100 5,000 TO 9,999	M 100 TO 499 ☐ 10,000 OR MOR		1,000 TO 4,999
IF SOLD	NET GAIN		_		☐ \$25,000OR MORE
	NET GAIN	☐ 5,000 TO 9,999	10,000 OR MOR \$5,000\$9,999	E	
IF SOLD BUSINESS ENTIT	NET GAIN NET LOSS	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 MARSH + Mc	□ 10,000 OR MOR □ \$5,000\$9,999	\$10,000\$24,999 AME	\$25,000OR MORE
BUSINESS ENTIT	NET GAIN NET LOSS Y ACQUIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 MARSH + MC	□ 10,000 OR MOR □ \$5,000\$9,999 NA LENNA-N □ SPOUSE	\$10,000\$24,999 AME C OS DEPENDENT CHIL	\$25,000OR MORE
IF SOLD BUSINESS ENTIT	NET GAIN NET LOSS Y ACQUIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 MAPS H ↑ MC ☐ FILER ☐ LESS THAN 100	□ 10,000 OR MOR □ \$5,000\$9,999 LENNAW □ SPOUSE □ 100 TO 499	\$10,000\$24,999 MME C OS DEPENDENT CHIL	\$25,000OR MORE
BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	NET GAIN NET LOSS Y ACQUIRED BY ARES	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 MARS H ↑ MC ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	□ 10,000 OR MOR □ \$5,000\$9,999 LENNAW □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR	\$10,000\$24,999 MME C O.S DEPENDENT CHIL 500 TO 999 E	□ \$25,000OR MORE □ \$25,000OR MORE □ \$25,000OR MORE
BUSINESS ENTIT	NET GAIN NET LOSS Y ACQUIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 MAPS H ↑ MC ☐ FILER ☐ LESS THAN 100	□ 10,000 OR MOR □ \$5,000\$9,999 LENNAW □ SPOUSE □ 100 TO 499	\$10,000\$24,999 MME C OS DEPENDENT CHIL	\$25,000OR MORE

Austin, Texas 78711-2070

P.O. Box 12070

STOCK					PART 2
☐ NOTAPPLI	CABLE				
and indicate the ca	itegory of the numb mount of the net	, your spouse, or a dep per of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
1 BUSINESS ENTI	TY	Microsoft		AME	
² STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHA	ARES	☐ LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	X 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	ΓΥ			AME	
0.7001/ 1151 D 0.5	2 400LUDED DV		SERMAID I		
STOCK HELD OR		FILER	SPOUSE	DEPENDENT CHIL	
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
IE COLD		☐ 5,000 TO 9,999	☐ 10,000 OR MOR		
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT		PFIZER 1		AME .	
BUSINESS ENTIT	ГҮ	PFIZER 1		DEPENDENT CHIL	_D
	TY R ACQUIRED BY	FILER LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHIL	_D \[\sqrt{1,000 TO 4,999}\]
STOCK HELD OR	TY R ACQUIRED BY	₩ FILER	NC ☐ SPOUSE	DEPENDENT CHIL	
STOCK HELD OR	R ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999	1 ,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 SEAGATE T	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 SEAGATE T	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 SEAGATE T	SPOUSE	DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 MME DEPENDENT CHILD 500 TO 999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 SEAGATE T FILER LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 MME DEPENDENT CHILD 500 TO 999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS R ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 SEAGATE T ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	SPOUSE	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL 500 TO 999 E	□ \$25,000OR MORE □ \$25,000OR MORE □ \$25,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	R ACQUIRED BY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 100 TO 499 10,000 OR MOR \$5,000-\$9,999 NA	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999	D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS Y ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 SEAGATE T FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 STEWART FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 SF,000-\$9,999 SF,000-\$9,000-\$9,000 SF,000-\$9,000 SF,000-\$9,000	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999	D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS Y ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 SEAGATE TO FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 STEWART FILER LESS THAN 100 LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 S5,000\$9,999 10,000 OR MOR \$5,000\$9,999 NA	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL 500 TO 999 E DEPENDENT CHIL 500 TO 999	D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES ACQUIRED BY ARES	LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR \$5,000	□ DEPENDENT CHIL □ 500 TO 999 E □ \$10,000\$24,999 ME □ DEPENDENT CHIL □ 500 TO 999 E □ \$10,000\$24,999 ME □ DEPENDENT CHIL □ 500 TO 999 E	D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS Y ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 SEAGATE TO FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 STEWART FILER LESS THAN 100 LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 S5,000\$9,999 10,000 OR MOR \$5,000\$9,999 NA	DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL 500 TO 999 E DEPENDENT CHIL 500 TO 999	D

P.O. Box 12070

STOCK				PART 2
NOTAPPLICABLE				
List each business entity in which you and indicate the category of the num category of the amount of the net INSTRUCTION GUIDE.	ber of shares held or a	cquired. If some o	r all of the stock was	sold, also indicate the
When reporting information about a providing the number under which the			e child about whom	you are reporting by
¹ BUSINESS ENTITY	TALBOTS	INC	AME	
² STOCK HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
³ NUMBER OF SHARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOF	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD	LESS THAN \$5,000	S5,000\$9,999	S10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTITY	4	N	AME	
STOCK HELD OR ACQUIRED BY	WSEC INC	SPOUSE	DEPENDENT CHI	
NUMBER OF SHARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☒ 1,000 TO 4,999
	☐ 5,000 TO 9,999	10,000 OR MOF	RE	
IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTITY			AME	
STOCK HELD OR ACQUIRED BY	WALMART	STOR ES ☐ SPOUSE	DEPENDENT CHI	I.D.
-	-	☐ 3FOUSE ☐ 100 TO 499	500 TO 999	X 1,000 TO 4,999
NUMBER OF SHARES	☐ 5,000 TO 9,999	☐ 10,000 OR MOR		A 1,000 10 4,555
IF SOLD	LESS THAN \$5,000	<u>\$5,000\$9,999</u>	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTITY		N/	AME	
	1	<u> </u>		
STOCK HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	
NUMBER OF SHARES	LESS THAN 100	100 TO 499	⊠ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ 5,000 TO 9,999	☐ 10,000 OR MOR		
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	<u>\$10,000\$24,999</u>	☐ \$25,000OR MORE
BUSINESS ENTITY			AME	
STOCK HELD OR ACQUIRED BY	MANPOWE	RINC SPOUSE	DEPENDENT CHIL	
	1	☐ SPOUSE	500 TO 999	☐ 1,000 TO 4,999
NUMBER OF SHARES	LESS THAN 100	☐ 10,000 OR MOR		1,000 1O 4,999
IF SOLD	☐ 3,000 TO 9,999	\$5,000\$9,999		\$25,000OR MORE
	Y AND ATTACH ADDITIO	NAL DAGES AS NE		

SPOUSE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

1 100 TO 499

☐ 10,000 OR MORE

DEPENDENT CHILD

☐ 500 TO 999

☑ LESS THAN \$5,000 □ \$5,000--\$9,999 □ \$10,000-\$24,999 □ \$25,000--OR MORE

⊠ FILER

LESS THAN 100

5,000 TO 9,999

STOCK HELD OR ACQUIRED BY

NET GAIN

☐ NET LOSS

NUMBER OF SHARES

IF SOLD

1,000 TO 4,999

IF SOLD

■ NET GAIN

☐ NET LOSS

LESS THAN \$5,000

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

BONDS, NOTES & O	THER COMMERCIAL PAPER PART 3
NOTAPPLICABLE	
	mmercial paper held or acquired by you, your spouse, or a dependent child during the se category of the amount of the net gain or loss realized from the sale. For more RUCTION GUIDE.
	t a dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet.
DESCRIPTION OF INSTRUMENT	MANAGED TRA ACCOUNT TREASURY NOTES + BILLS (MANAGED BY FIDELITY)
² HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
3 IF SOLD	
☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
NET LOSS	
DESCRIPTION OF INSTRUMENT	MANAGED IRA ACCOUNT CORPORATE BONDS (MANAGED BY FIDELITY)
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD	
☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
☐ NET LOSS	
DESCRIPTION OF INSTRUMENT	MANAGED IRA ACCOUNT CASH RESERVES (MANAGED BY FIDELITY)
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD	
NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
☐ NET LOSS	
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS

PART 4



List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

providing the number under which the child is listed on the Cover Sheet.					
1 MUTUAL FUND		NA	AME		
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD		
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	500 TO 999 1,000 TO 4,999		
	5,000 TO 9,999	10,000 OR MOR	RE		
4 IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
MUTUAL FUND		NA	ME		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999 ☐ 1,000 TO 4,999		
OF MOTOAL FOND	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	EE .		
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE		
MUTUAL FUND		NA	ME		
·					
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999 ☐ 1,000 TO 4,999		
C, MOTO/IE, OND	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
COPY	AND ATTACH ADDITIO	NAL PAGES AS NE	CESSARY		

INCOME FROM INTE	EREST, DIVID	ENDS, ROYAL	TIES & RENT	S PART 5
List each source of income you, y interest, dividends, royalties, and remore information, see FORM PFS—When reporting information about providing the number under which	ents during the calenda -INSTRUCTION GUID ut a dependent child's	ar year and indicate the E. s activity, indicate the	category of the amoun	nt of the income. For
1 SOURCE OF INCOME	HARTSFIE	NAME AND NMUNITY CRE ILD-JACKSON , GA 30320		RPT
² RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHIL	_D
3 AMOUNT	\$500\$4,999	\$5,000 \$ 9,999	\$10,000\$24,999	\$25,000OR MORE
SOURCE OF INCOME	P.O. BOX	NAMEAND CREDIT UN 1089 TX 78767		
RECEIVED BY	Filer	SPOUSE	DEPENDENT CHIL	.D
AMOUNT	\$500\$4,999	\$5,000\$9,999	\$10,000\$24,999 [\$25,000OR MORE
SOURCE OF INCOME	P.O. BOX 1	NAME AND CREDIT UN US9 TX 78767		
RECEIVED BY	☐ FILER	SPOUSE	DEPENDENT CHIL	.D
AMOUNT	\$500\$4,999	\$5,000\$9,999	\$10,000\$24,999] \$25,000OR MORE
COPY A	ND ATTACH ADDI	TIONAL PAGES AS	NECESSARY	

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5 NOTAPPLICABLE List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS SOURCE OF INCOME FIDELITY MANAGED ACCOUNT 200 LIBERTY ST. 5th Floor NEW YORK, NY 10281-5500 **RECEIVED BY** FILER SPOUSE DEPENDENT CHILD _____ **AMOUNT** \$500--\$4,999 □ \$5,000--\$9,999 □ \$10,000--\$24,999 □ \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME RECEIVED BY ☐ FILER SPOUSE ☐ DEPENDENT CHILD _ **AMOUNT** \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE \$500-\$4,999 NAME AND ADDRESS SOURCE OF INCOME **RECEIVED BY** ☐ FILER SPOUSE DEPENDENT CHILD ___ **AMOUNT** \$500--\$4,999 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS

P.O. Box 12070

PART 6

× ×	IOTAPPLICABL
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Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

providing the number under which the child is listed on the Cover Sheet.			
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT			
² LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD
3 GUARANTOR			
4 AMOUNT	S1,000\$4,999	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT			
LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD
GUARANTOR			
AMOUNT	S1,000\$4,999	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT			
LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD
GUARANTOR			
AMOUNT	\$1,000 \$4 ,999	S5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE
COPY A	ND ATTACH ADDITI	ONAL PAGES AS	NECESSARY

IF SOLD

☐ NET GAIN NET LOSS

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE

1-800-325-8506

À	NOTAPPLICABL
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Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

providing the number under which the child is listed on the Cover Sheet.			
1 HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHILD
DESCRIPTION		NAME AN	D ADDRESS
3 IF SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000	☐ \$10,000\$24,999 ☐ \$25,000OR MORE
HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHILD
DESCRIPTION		NAME ANI	DADDRESS
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000	☐ \$10,000\$24,999 ☐ \$25,000OR MORE
HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD
DESCRIPTION		NAME AND	DADDRESS
IF SOLD NET GAIN NET LOSS	LESS THAN	\$5,000 \$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE
COPY A	ND ATTACH A	DDITIONAL PAGES AS	NECESSARY

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2	070 (512) 463-5800	1-800-325-850
GIFTS				PART 8
NOTAPPLICABLE	_			
Identify any person or organiz describe the gift. Do not inclu- under chapter 305 of the Go- person related to the recipient -INSTRUCTION GUIDE.	de: 1) expenditures red vernment Code; 2) po	quired to be reported by a plitical contributions report	person required to be registe ted as required by law; or 3)	red as a lobbyist gifts given by a
When reporting information providing the number under w			ne child about whom you a	re reporting by
1 DONOR		NAME A	AND ADDRESS	
² RECIPIENT	☐ FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION OF GIFT				
		NAME A	ND ADDRESS	
DONOR				
RECIPIENT	FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION OF GIFT				
DONOR		NAME A	ND ADDRESS	
DONOR				
RECIPIENT	☐ FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION OF GIFT				

TRUSTINCOME				PART 9
NOTAPPLICABLE	<u>.</u>	_		
Identify each source of income rece category of the amount of income r than \$500 in income, if the identity of When reporting information about providing the number under which the	eceived. Also identify ea of the asset is known. Fo t a dependent child's a	ch asset of the trus r more information, ctivity, indicate the	t from which the beneficiary see FORM PFSINSTRUG	received <i>more</i> CTION GUIDE.
1 SOURCE	D=		FTRUST	_
	DEGIA PICO	IS RETIRE	MENT Trust (F	^ว ะพรเงพ)
BENEFICIARY	FiLER	SPOUSE	☐ DEPENDENT CHILD _	
INCOME	LESS THAN \$5,000	S5,000\$9,999	\$10,000\$24,999 \$ 25	5,000-OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED				
UNKNOWN				
SOURCE		NAMED OF DEFENSE I TIREMENT	FTRUST Finance + Acct. PENSION)	
BENEFICIARY	FILER	SPOUSE	DEPENDENT CHILD	
INCOME	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 🗆 \$25	5,000OR MORE
ASSETS FROM WHICH				
OVER \$500 WAS RECEIVED				
UNKNOWN				
SOURCE	SOCIAL	SELURIT	FTRUST	
BENEFICIARY	Filer	SPOUSE	DEPENDENT CHILD	
INCOME	LESS THAN \$5,000	\$5,000\$9,999	□ \$10,000\$24,999 □ \$25	5,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED	_			- "
UNKNOWN				
CORY A	ND ATTACH ADDITIO	NAL BAGES AS	NECESSARY	

BLIND TRUSTS			PART 10A
NOTAPPLICABLE			
Identify each blind trust that compli	es with section 572.023((c) of the Governme	ent Code. See FORM PFSINSTRUCTION
When reporting information about providing the number under which			e child about whom you are reporting by
1 NAME OF TRUST			
² TRUSTEE		NAMEA	ND ADDRESS
³ BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD
4 FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE
5 DATE CREATED			
NAME OF TRUST			
TRUSTEE		NAMEAN	ND ADDRESS
BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD
FAIR MARKET VALUE	LESS THAN \$5,000	<u>\$5,000-</u> \$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE
DATE CREATED			
NAME OF TRUST			
TRUSTEE	-	NAME AN	ID ADDRESS
		·	
BENEFICIARY	FILER	SPOUSE	DEPENDENT CHILD
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000-OR MORE
DATE CREATED			
COPY A	ND ATTACH ADDITIO	DNAL PAGES AS	S NECESSARY

TRUSTEE STATEMENT

PART 10B

ΔZ	
ĽŅ	NOTAPPLICABLE

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1	NAME OF TRUST	· ·
2	TRUSTEE NAME	
3	FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
4	TRUSTEE STATEMENT	I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.
		Trustee Signature

§ 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
 - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;
 - (14) identification of each blind trust that complies with Subsection (c), including:
 - (A) the category of the fair market value of the trust;
 - (B) the date the trust was created;
 - (C) the name and address of the trustee; and
 - (D) a statement signed by the trustee, under penalty of perjury, stating that:
 - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
 - (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
 - (1) the trustee:
 - (A) is a disinterested party;
 - (B) is not the individual;
 - (C) is not required to register as a lobbyist under Chapter 305;
 - (D) is not a public officer or public employee; and
 - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises: and
 - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

X	NOTAPPLICABLE
17	

Texas Ethics Commission

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

Austin, Texas 78711-2070

¹ BUSINESS ASSOCIATION		NAME AN	DADDRESS	
² BUSINESS TYPE		_		
³ HELD, ACQUIRED, OR SOLD BY	☐ FILER	SPOUSE	DEPENDENT CHILD —	
4 ASSETS	DES	CRIPTION	CATEGORY	
			LESS THAN \$5,000 S5,00	00\$9,999
			\$25,0	000OR MORE
			☐ LESS THAN \$5,000 ☐ \$5,00	00\$9,999
			\$10,000\$24,999 S25,0	000OR MORE
	,		. 	00\$9,999
			i	000OR MORE
			.	
				00\$9,999
			\$10,000-\$24,999 \$25,0	000OR MORE
				00\$9,999
			 	000OR MORE
			LESS THAN \$5,000 \$5,00	00\$9,999
			\$10,000\$24,999 S25,0	000OR MORE
			LESS THAN \$5,000	00\$9,999
			\$10,000\$24,999 \$25,0	000OR MORE
			.	
				00\$9,999
			\$10,000\$24,999 \$25,0	000OR MORE

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11B

1-800-325-8506

` _	
X	NOTAPPLICABLE
$\boldsymbol{\mathcal{L}}$	

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

providing the number under	oviding the number under which the child is listed on the Cover Sheet.				
¹ BUSINESS ASSOCIATION	NAME AND ADDRESS				
² BUSINESS TYPE					
3 HELD, ACQUIRED, OR SOLD BY	☐ FILER	SPOUSE	DEPENDENT	CHILD	
4 LIABILITIES	DES	SCRIPTION	1	GORY	
	Ì		LESS THAN \$5,000	_	
			\$10,000\$24,999	\$25,000OR MORE	
			LESS THAN \$5,000	\$5,000\$9,999	
			\$10,000\$24,999	\$25,000OR MORE	
			 	\$5,000\$9,999	
			\$10,000\$24,999	\$25,000OR MORE	
			LESS THAN \$5,000	\$5,000\$9,999	
		·	\$10,000\$24,999	□ \$25,000OR MORE	
			LESS THAN \$5,000	\$5,000\$9,999	
			 \$10,000\$24,999	\$25,000OR MORE	
			LESS THAN \$5,000	\$5,000\$9,999	
			 	☐ \$25,000OR MORE	
			· · · · · · · · · · · · · · · · · · ·	_	
			LESS THAN \$5,000	\$5,000\$9,999	
			\$10,000\$24,999	\$25,000OR MORE	
			 	\$5,000\$9,999	
			\$10,000\$24,999	☐ \$25,000OR MORE	
	CODY AND ATTACH		AC NECECCARY		

BOARDS AND EXECUTIVE POSITIONS PART 12

DOANDOAND L		. 001110110			
NOTAPPLICABLE					
List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS—INSTRUCTION GUIDE.					
	When reporting information about a dependent child's activity, indicate the child about whom you are reporting b providing the number under which the child is listed on the Cover Sheet.				
1 ORGANIZATION	CAPITAL	NETRO TRANSPOR	TATION AUTHORITY		
POSITION HELD	BOARD Y	nember			
³ POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION		IL SULID WASTE M E RECOVERY ADVISOR	ANAGEMENT AND Y COUNCIL		
POSITION HELD	BOARD 1	nember			
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	TRAVIS	ANDUBON SOCIE	TY		
POSITION HELD	HONORAT	LY BOARD MEMBE	R		
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION					
POSITION HELD					
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION					
POSITION HELD			·		
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD		
0	OPY AND ATTAC	CH ADDITIONAL PAGES A	S NECESSARY		

(512) 463-5800

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

P.O. Box 12070

PART 13

λ	, NOTAPPLICABLE
7	

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS
² AMOUNT	
PROVIDER	NAME AND ADDRESS
	·
AMOUNT	
	NAME AND ADDRESS
PROVIDER	
AMOUNT	
AMOUNT	
	NAME AND ADDRESS
PROVIDER	•
ANACHANT	
AMOUNT	

INTEREST IN BUSINESS IN COMMON WITH LOBBYIST **PART 14** NOTAPPLICABLE Identify each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association, other than a publicly-held corporation, in which you, your spouse, or a dependent child, and a person registered as a lobbyist under chapter 305 of the Government Code that both have an interest. For more information, see FORM PFS--INSTRUCTION GUIDE. NAME AND ADDRESS **BUSINESS ENTITY** 2 INTEREST HELD BY ☐ FILER SPOUSE DEPENDENT CHILD _____ NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY FILER SPOUSE DEPENDENT CHILD ____ NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY FILER SPOUSE DEPENDENT CHILD _____ NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY FILER SPOUSE DEPENDENT CHILD _____ NAME AND ADDRESS **BUSINESS ENTITY** INTEREST HELD BY FILER SPOUSE DEPENDENT CHILD _____ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

FEES RECEIVED FOR SERVICES RENDERED

PART **15**

TO A LOBBYIST OR LOBBYIST'S EMPLOYER NOTAPPLICABLE					
Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFSINSTRUCTION GUIDE.					
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED					
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	S10,000\$24,999	\$25,000OR MORE	
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED			,		
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED					
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED					
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED					
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED					
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

REPRESENTATION BY LEGISLATOR BEFORE STATE AGENCY

PART 16

NOTAPPLICABLE

This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS--INSTRUCTION GUIDE.

Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerial acts on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003.

1 STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
STATE AGENCY				1
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
COPY A	ND ATTACH ADDITIO	NAL PAGES AS	NECESSARY	

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 17

A	NOTAPPLICABLE
---	---------------

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS—INSTRUCTION GUIDE.

SOURCE OF BENEFIT	NAME AND ADDRESS					
BENEFIT						
SOURCE OF BENEFIT	NAME AND ADDRESS					
BENEFIT						
	NAME AND ADDRESS					
SOURCE OF BENEFIT						
BENEFIT						
	NAME AND ADDRESS					
SOURCE OF BENEFIT	N. W. C. M.					
DENEELT						
BENEFIT						
C	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

LEGISLATIVE CONT	INUANCES		PART 18
NOTAPPLICABLE			
and Remedies Code, or under	another law or rule	applied for or obtained under section ethat requires or permits a court to member-elect of the legislature.	
NAME OF PARTY REPRESENTED			
DATE RETAINED			
3 STYLE, CAUSE NUMBER, COURT & JURISDICTION			
DATE OF CONTINUANCE APPLICATION			
WAS CONTINUANCE GRANTED?	☐ YES	□ NO	
NAME OF PARTY REPRESENTED			
DATE RETAINED			·
STYLE, CAUSE NUMBER, COURT, & JURISDICTION			
DATE OF CONTINUANCE APPLICATION			
WAS CONTINUANCE GRANTED?	☐ YES	□ NO	
COPY	AND ATTACH A	DDITIONAL PAGES AS NECES	SSARY

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, that my financial statement is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE



Sworn to and subscribed before me, by the said <u>Lec Leffing Well</u>, this the <u>264h</u> day of <u>April</u>, 2027, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 Texas Ethics Commission P.O. Box 12070 PERSONAL FINANCIAL STATEMENT FORM PFS

			С	OVER SHEET		
		n accordance with chapter 572 of the Government Code.	TOTAL NUMBER OF PAGES FILED:			
	For filings required in 2008, covering calendar year ending December 31, 2007. Use FORM PFSINSTRUCTION GUIDE when completing this form.		ACCOUNT #			
1	NAME	TITLE; FIRST; MI	OFFICE	USE ONLY		
		NICKNAME; LAST; SUFFIX	Date Received			
		LEFFINGWELL		20		
2	ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	1	AU Pos 1800		
		CITY OF AUSTIN		AUSTIN POSTING:		
		301 W. 2nd street	Receipt #	S S S		
		AUSTIN, TX 78701	HD / PM	<u> </u>		
_		(CHECK IF FILER'S HOME ADDRESS)		Ameyor TE		
3	TELEPHONE NUMBER	AREA CODE PHONE NUMBER; EXTENSION	Date Processed	3		
	NOWIDER	(512) 974-2260	Date Imaged	ى كى RK		
4	REASON FOR FILING STATEMENT	CANDIDATE				
	•	DELECTED OFFICER AUSTIN CITY COUNCIL -	YLACE 1	(INDICATE OFFICE)		
		APPOINTED OFFICER		(INDICATE AGENCY)		
		EXECUTIVE HEAD		(INDICATE AGENCY)		
		FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT	e south			
		STATE PARTY CHAIR		(INDICATE PARTY)		
		OTHER		(INDICATE POSITION)		
5		hose financial activity you are reporting (filer must report information about the if the filer had actual control over that activity):	financial activity of	the filer's spouse or		
	SPOUSE	ULIE BYERS				
	DEPENDENT C	HILD 1				
		2.				
		3				
==						

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

SOURCES OF OCCU	PATIONAL INCOME PART 1A			
NOTAPPLICABLE				
When reporting information about a dependent child's activity, indicate the child about whom you are reporting providing the number under which the child is listed on the Cover Sheet.				
1 INFORMATION RELATES TO	FILER SPOUSE DEPENDENT CHILD			
2 EMPLOYMENT	NAMEAND ADDRESS OF EMPLOYER / POSITION HELD (Check If Filer's Home Address)			
EMPLOYED BY ANOTHER	CITY OF AUSTIN 301 W. 2ND Street AUSTIN, TX 78701			
SELF-EMPLOYED	CITY COUNCIL MEMBER NATURE OF OCCUPATION			
INFORMATION RELATES TO	FILER SPOUSE DEPENDENT CHILD			
EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD (Check If Filer's Home Address)			
EMPLOYED BY ANOTHER	SETON NORTHWEST HOSPITAL 11113 RESEARCH BLVD AUSTIN, TX 75759			
SELF-EMPLOYED	REGISTERED NURSE			
INFORMATION RELATES TO	FILER SPOUSE DEPENDENT CHILD			
EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD (Check If Filer's Home Address)			
EMPLOYED BY ANOTHER				
SELF-EMPLOYED	NATURE OF OCCUPATION			
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY			

FEE AMOUNT

Texas Etilics Continues on	, DOX 12010	Austin, Texas 70711-2070	(312)403-3000	1 000 020 000
RETAINERS				PART 1B
NOTAPPLICABLE				
This section concerns fees received your spouse, or a dependent child he services on a matter specified at the the work actually performed during the see FORM PFS-INSTRUCTION GI	ave a "substantial i e time of contracting he calendar year di	nterest") for a claim on future se g for or receiving the fee. Repo	ervices in case of need ort information here onl	, rather than for y if the value of
When reporting information abou providing the number under which			about whom you ar	e reporting by
1 FEE RECEIVED FROM		NAME AND ADDRE	ess	
2 FEE RECEIVED BY		NAME OF BUSIN	ESS	
TEL REGEIVED DI	FILER OR FILER'S E	BUSINESS		
	SPOUSE OR SPOUSE	S BUSINESS		
	DEPENDENT OR CHILD'S I	CHILDBUSINESS		
FEE AMOUNT	LESS THAN \$	\$5,000 \$5,000\$9,999 \$	10,000\$24,999 \$25	,000OR MORE
		NAME AND ADDRE	SS	
FEE RECEIVED FROM				
FEE RECEIVED BY		NAME OF BUSIN	ESS	
	FILER OR FILER'S B	BUSINESS		
	SPOUSE OR SPOUSE'S	S BUSINESS		
	DEPENDENT OR CHILD'S E	CHILD		
				

LESS THAN \$5,000

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

\$5,000--\$9,999

\$10,000--\$24,999

\$25,000-OR MORE

☐ 10.000 OR MORE

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000-OR MORE

5.000 TO 9.999

LESS THAN \$5,000

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

NET GAIN

NET LOSS

IF SOLD

i .					PART 2	
☐ NOTAPPLIC	ABLE					
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE.						
		dependent child's ac child is listed on the C		child about whom	you are reporting by	
¹ BUSINESS ENTIT	Y	AVGRY D	ENNISON	AME .		
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD	
3 NUMBER OF SHA	RES	LESS THAN 100		☐ 500 TO 999	1,000 TO 4,999	
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000—OR MORE	
BUSINESS ENTIT	Y	Bon Danie		AME		
STOCK HELD OR	ACQUIRED BY	BED BATH +	SPOUSE	DEPENDENT CHIL		
NUMBER OF SHA	RES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
		□ 5,000 TO 9,999	10,000 OR MOR	RE		
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
BUSINESS ENTIT	Y	BR1665+ ST		AME		
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL		
STOCK HELD OR ACQUIRED BY		T1.500.711441400	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
NUMBER OF SHARES		LESS THAN 100	100 10 499			
NUMBER OF SHA	RES	5,000 TO 9,999	☐ 10,000 OR MOR	RE		
IF SOLD	RES NET GAIN NET LOSS		=	\$10,000\$24,999	\$25,000-OR MORE	
	NET GAIN NET LOSS	5,000 TO 9,999	10,000 OR MOR \$5,000\$9,999	\$10,000\$24,999		
IF SOLD BUSINESS ENTITY	NET GAIN NET LOSS	□ 5,000 TO 9,999 □ LESS THAN \$5,000 BROADRIDGE	10,000 OR MOR \$5,000\$9,999	\$10,000-\$24,999 AME SOLUTIONS		
BUSINESS ENTITY STOCK HELD OR	NET GAIN NET LOSS Y ACQUIRED BY	D LESS THAN \$5,000 BROADRIDGE FILER	10,000 OR MOR \$5,000\$9,999	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL	.D	
IF SOLD BUSINESS ENTITY	NET GAIN NET LOSS Y ACQUIRED BY	DROADRIDGE Steel Steel	10,000 OR MOR \$5,000\$9,999	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL		
BUSINESS ENTITY STOCK HELD OR	NET GAIN NET LOSS Y ACQUIRED BY	D LESS THAN \$5,000 BROADRIDGE FILER	10,000 OR MOR \$5,000\$9,999 FINANCIAL SPOUSE 100 TO 499	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL	.D	
BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	10,000 OR MOR \$5,000\$9,999 N/ FIVANCIAL SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL 500 TO 999	D 1,000 TO 4,999	
BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS	5,000 TO 9,999	10,000 OR MOR \$5,000-\$9,999 **FINANCIAL** SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999		
BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY STOCK HELD OR	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ ROADRIDGE ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ THE STAN \$5,000 ☐ THE STAN \$5,000	10,000 OR MOR \$5,000\$9,999 N/2 SPOUSE 10,000 OR MOR \$5,000-\$9,999 N/2 SPOUSE SPOUS	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL		
BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ ROADRIDGE ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100	10,000 OR MOR \$5,000-\$9,999 **FINANCIAL** SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL 500 TO 999		
BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY STOCK HELD OR	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ ROADRIDGE ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ THE STAN \$5,000 ☐ THE STAN \$5,000	10,000 OR MOR \$5,000-\$9,999	\$10,000\$24,999 AME SOLUTIONS DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL 500 TO 999		

(512) 463-5800

P.O. Box 12070

STOCK					PART 2
☐ NOTAPPLIC	CABLE				
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE.					
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTIT	ΓY .	DIXIE GR	WUP N	AME	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
3 NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	Υ	Du David	N/	AME	
STOCK HELD OR	ACQUIRED BY	DU PONT	SPOUSE	DEPENDENT CHIL	
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499		☐ 1,000 TO 4,999
		5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
	NET 1033				
BUSINESS ENTIT		Ethan Alla		AME	
BUSINESS ENTIT	Y	Etnan Alle		AME DEPENDENT CHIL	.D
	ACQUIRED BY	FILER LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHIL	_D ☐ 1,000 TO 4,999
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	1,000 TO 4,999 \$25,000-OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Glanget	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Glannet Filer LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 NA SPOUSE 100 TO 499	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Glanned FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 NA SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 15 \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E	☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE ☐ D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ACQUIRED BY ARES NET GAIN NET LOSS Y	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Glannett FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 NA SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 15 \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE .D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS Y ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Glannet Filer LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 GENERAL FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 NA 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999 NA SPOUSE SPOUSE	DEPENDENT CHIL 500 TO 999 15 \$10,000\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999 ME DEPENDENT CHIL	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ □ \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS Y ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 GANCH FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 GENERAL FILER LESS THAN 100 LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 NA SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 NA SPOUSE 100 TO 499 1000 TO 499	DEPENDENT CHIL 500 TO 999 15 \$10,000-\$24,999 16 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 ME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE .D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS Y ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Glannet Filer LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 GENERAL FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 NA 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999 NA SPOUSE SPOUSE	DEPENDENT CHIL 500 TO 999 15 \$10,000-\$24,999 16 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 ME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ □ \$25,000OR MORE

1-800-325-8506

BUSINESS ENTITY	NAME			
	KELLWOOD	>		
STOCK HELD OR ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHARES	LESS THAN 100	☐ 100 TO 499	⊠ 500 TO 999	1,000 TO 4,999
	5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD □ NET GAIN □ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE

P.O. Box 12070

STOCK					PART 2	
☐ NOTAPPLICA	ABLE					
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE.						
		dependent child's ac child is listed on the Co		child about whom	you are reporting by	
1 BUSINESS ENTITY	Y	KEMET	N/	AME		
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD	
³ NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999	
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE	
BUSINESS ENTITY	Y			AME		
STOCK HELD OR	ACQUIRED BY	KIMBERLY Derler	CLARK. SPOUSE	DEPENDENT CHIL	LD	
NUMBER OF SHA	RES	LESS THAN 100	100 TO 499	∑ 500 TO 999	1,000 TO 4,999	
-		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	!E		
iF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
	NET LOSS					
BUSINESS ENTITY		LAZ BOY	N/	AME		
BUSINESS ENTITY STOCK HELD OR A	Y	LA Z BOY	NA SPOUSE	AME DEPENDENT CHIL	_D	
	Y ACQUIRED BY	FILER LESS THAN 100	☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL	_D 1,000 TO 4,999	
STOCK HELD OR	Y ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_	
STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHIL	1,000 TO 4,999	
STOCK HELD OR AN NUMBER OF SHAIR	ACQUIRED BY RES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 LEGGETT + PL	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 5E \$10,000-\$24,999	1,000 TO 4,999 \$25,000—OR MORE	
STOCK HELD OR A NUMBER OF SHAIR IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	I FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 LEGGETT + PE	SPOUSE \$ 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL	1,000 TO 4,999 \$25,000-OR MORE	
STOCK HELD OR AN NUMBER OF SHAIR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 LEGGETT + PE	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 NA □ ATT □ SPOUSE □ 100 TO 499	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	1,000 TO 4,999 \$25,000—OR MORE	
STOCK HELD OR AN INUMBER OF SHAIR SOLD BUSINESS ENTITY STOCK HELD OR AN INUMBER OF SHAIR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 **ATT* SPOUSE 100 TO 499 10,000 OR MOR	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999	
STOCK HELD OR A NUMBER OF SHAIR IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 LEGGETT + PE	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 **ATT* SPOUSE 100 TO 499 10,000 OR MOR	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE	
STOCK HELD OR AN INUMBER OF SHAIR SOLD BUSINESS ENTITY STOCK HELD OR AN INUMBER OF SHAIR	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET LOSS	LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 NA ATT SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999	
STOCK HELD OR AN INUMBER OF SHARE BUSINESS ENTITY STOCK HELD OR AN INUMBER OF SHARE IF SOLD BUSINESS ENTITY	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 LEGGETT + Pl Stilen LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MARSH + Mcl	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 NA -ATT □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE	
STOCK HELD OR A NUMBER OF SHAIR IF SOLD BUSINESS ENTITY STOCK HELD OR A BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN ACQUIRED BY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 LEGGETT + PL FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MARCH + McL	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 NA ATT □ SPOUSE □ 10,000 OR MOR □ \$5,000\$9,999 □ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ D	
STOCK HELD OR AN INUMBER OF SHARE BUSINESS ENTITY STOCK HELD OR AN INUMBER OF SHARE IF SOLD BUSINESS ENTITY	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN ACQUIRED BY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 LEGGETT + PL FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MARCH + McL FILER LESS THAN 100	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 NA -ATT □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE	
STOCK HELD OR A NUMBER OF SHAIR IF SOLD BUSINESS ENTITY STOCK HELD OR A BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN ACQUIRED BY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 LEGGETT + PL FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MARCH + McL	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999 SPOUSE 100 TO 499 100 TO 490 100 TO 490 100 TO 490 100 TO 490 100 TO 49	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	□ 1,000 TO 4,999 □ \$25,000-OR MORE □ \$1,000 TO 4,999 □ \$25,000-OR MORE □ \$1,000 TO 4,999 □ \$1,000 TO 4,999	

LESS THAN 100

5,000 TO 9,999

NUMBER OF SHARES

NET GAIN

NET LOSS

IF SOLD

☐ 500 TO 999

LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

100 TO 499

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ 10,000 OR MORE

STOCK					PART 2	
☐ NOTAPPLICABLE						
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.						
	When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.					
¹ BUSINESS ENTI	TY	OFFICE DES		AME		
² STOCK HELD OF	R ACQUIRED BY	OFFICE DET	SPOUSE	DEPENDENT CHI	LD	
³ NUMBER OF SH	ARES	LESS THAN 100		☐ 500 TO 999	1,000 TO 4,999	
		5,000 TO 9,999	☐ 10,000 OR MOR	RE	_	
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
BUSINESS ENTI	TY	TALBOTS	N.	AME ·		
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE		
IF SOLD	NET GAIN	☐ LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
	NET LOSS					
BUSINESS ENTI		TARGET	N/	AME		
BUSINESS ENTI	TY	TARGET DIFILER	N/	AME DEPENDENT CHIL	_D	
	TY R ACQUIRED BY				_D 1,000 TO 4,999	
STOCK HELD OF	TY R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL		
STOCK HELD OF	TY R ACQUIRED BY	FILER LESS THAN 100	☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL		
STOCK HELD OF	TY R ACQUIRED BY ARES INET GAIN INET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHII	1,000 TO 4,999	
STOCK HELD OF NUMBER OF SHA	TY R ACQUIRED BY ARES INET GAIN INET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHII 500 TO 999 E 10 \$10,000\$24,999	1,000 TO 4,999 \$25,000-OR MORE	
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	LESS THAN 100	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999	1,000 TO 4,999 \$25,000-OR MORE	
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	I LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Market Strain \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHILD 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE	
STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	I LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 3 M FILER LESS THAN 100	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHILD 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE	
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY ARES INET GAIN INET GAIN INET GAIN INET GAIN INET GAIN INET GAIN INET LOSS	LESS THAN 100	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHILD \$500 TO 999 E	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999	
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY ARES INET GAIN INET GAIN INET GAIN INET GAIN INET LOSS TY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 3 M FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 WALMART	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 N/ ☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHILD \$ 500 TO 999 \$E \$10,000\$24,999 AME DEPENDENT CHILD \$ 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE	
STOCK HELD OF NUMBER OF SHATE STOCK HELD OR NUMBER OF SHATE STOCK HELD OR BUSINESS ENTITESTOCK HELD OR STOCK HELD	TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY	ILESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 JFILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 WALMART FILER	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHILD \$ 500 TO 999 \$E \$10,000\$24,999 AME DEPENDENT CHILD \$ 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE	
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 3 M FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 WALMART	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA	DEPENDENT CHIL \$ 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL \$ 10,000\$24,999 AME DEPENDENT CHIL \$ 500 TO 999 E DEPENDENT CHIL \$ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE D	
STOCK HELD OF NUMBER OF SHATE STOCK HELD OR NUMBER OF SHATE SOLD BUSINESS ENTITED OR STOCK HELD OR	TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY ARES INET GAIN INET LOSS TY R ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 J M	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR	DEPENDENT CHIL \$ 500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL \$ 10,000\$24,999 AME DEPENDENT CHIL \$ 500 TO 999 E DEPENDENT CHIL \$ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000-OR MORE D	

P.O. Box 12070

STOCK					PART 2	
☐ NOTAPPLICABLE						
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.						
		dependent child's ac child is listed on the Co		child about whom	you are reporting by	
¹ BUSINESS ENTIT	Υ	WALGREEN		AME		
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD	
3 NUMBER OF SHA	RES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOF	☐ 500 TO 999 RE	1,000 TO 4,999	
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
BUSINESS ENTIT	Υ	WELLS FAT		AME		
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D	
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
		□ 5,000 TO 9,999	10,000 OR MOR	KE		
IF SOLD	☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE	
BUSINESS ENTIT	Y	YRC WOR	LDWIDE	AME		
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D	
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	◯ 1,000 TO 4,999	
		☐ 5,000 TO 9,999	10,000 OR MOR	E		
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
BUSINESS ENTIT	Y	F0551L	NA.	AME .		
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D	
NUMBER OF SHA	RES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
		5,000 TO 9,999	10,000 OR MOR	E		
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
BUSINESS ENTIT	Y	U5EC	N.A	AME		
STOCK HELD OR	ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHIL	.D	
NUMBER OF SHA	RES	LESS THAN 100	⊠ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD	NET GAIN	KESS THAN \$5,000	\$5,000\$9,999	T \$10,000_\$24,000	\$25,000-OR MORE	
	NET LOSS			\$10,000\$24,999		

STOCK PART 2 □ NOTAPPLICABLE List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 BUSINESS ENTITY NAME ² STOCK HELD OR ACQUIRED BY SPOUSE DEPENDENT CHILD S FILER 3 NUMBER OF SHARES X 100 TO 499 LESS THAN 100 ☐ 500 TO 999 1.000 TO 4.999 5.000 TO 9.999 10,000 OR MORE 4 IF SOLD **NET GAIN** MILESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000-OR MORE NET LOSS **BUSINESS ENTITY** WILLIAMS SONOMA STOCK HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD **☑** 100 TO 499 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES LESS THAN 100 ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD NET GAIN ☑ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE NET LOSS **BUSINESS ENTITY** CLARK INC STOCK HELD OR ACQUIRED BY FILER ☐ SPOUSE DEPENDENT CHILD 100 TO 499 500 TO 999 1.000 TO 4.999 NUMBER OF SHARES LESS THAN 100 ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000-OR MORE **NET LOSS BUSINESS ENTITY** DOM JONES STOCK HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD 100 TO 499 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES LESS THAN 100 10,000 OR MORE 5,000 TO 9,999 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000-OR MORE **NET LOSS BUSINESS ENTITY** 6RAINGER STOCK HELD OR ACQUIRED BY ☑ FILER SPOUSE DEPENDENT CHILD ☐ 500 TO 999 NUMBER OF SHARES LESS THAN 100 100 TO 499 1,000 TO 4,999 ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD NET GAIN \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE K LESS THAN \$5,000 NET LOSS

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE

IF SOLD

☐ NET GAIN

NET LOSS

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STOCK					PART 2	
☐ NOTAPPLICA	ABLE					
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE.						
		dependent child's ac child is listed on the C		child about whom	you are reporting by	
1 BUSINESS ENTIT	Y	LEGGETT+		AME		
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD	
3 NUMBER OF SHA	RES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	100 TO 499 10,000 OR MOF	☐ 500 TO 999 RE	1,000 TO 4,999	
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
BUSINESS ENTIT	Y	11022200		AME		
STOCK HELD OR A	ACQUIRED BY	NORDSTRO7	SPOUSE	DEPENDENT CHIL	LD	
NUMBER OF SHA	RES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
		5,000 TO 9,999	10,000 OR MOR	RE		
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE	
BUSINESS ENTITY			N/	AME		
CTOCK HELD OB ACQUIRED BY		TAL BOXTS			*	
STOCK HELD OR A	ACQUIRED BY	TALBOTS	SPOUSE	DEPENDENT CHIL	D	
STOCK HELD OR A	·····		SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR		_D 1,000 TO 4,999	
	·····	☐ FILER ☐ LESS THAN 100	100 TO 499			
NUMBER OF SHAI	RES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	10,000 OR MOR 55,000\$9,999	500 TO 999	1,000 TO 4,999	
NUMBER OF SHAI	RES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 TARGET	10,000 OR MOR 55,000\$9,999	500 TO 999	1,000 TO 4,999 \$25,000-OR MORE	
IF SOLD BUSINESS ENTITY	RES NET GAIN NET LOSS ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 TARGET FILER LESS THAN 100	100 TO 499 10,000 OR MOR \$5,000\$9,999 N/ SPOUSE 100 TO 499	500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL	1,000 TO 4,999 \$25,000-OR MORE	
BUSINESS ENTITY STOCK HELD OR A	RES NET GAIN NET LOSS ACQUIRED BY RES	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	100 TO 499 10,000 OR MOR \$5,000\$9,999 N/ SPOUSE 10,000 OR MOR	500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999	
IF SOLD BUSINESS ENTITY STOCK HELD OR A	RES NET GAIN NET LOSS ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 TARGET FILER LESS THAN 100	100 TO 499 10,000 OR MOR \$5,000\$9,999 N/ SPOUSE 100 TO 499	500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL	1,000 TO 4,999 \$25,000-OR MORE	
BUSINESS ENTITY STOCK HELD OR A	RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 TARGET ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	10,000 OR MOR 10,000 OR MOR \$5,000\$9,999 N/ SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000\$9,999	500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999	
BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF	RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 TARGET FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 YRC WOR	D 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 N/ SPOUSE □ 10,000 OR MOR □ \$5,000\$9,999 □ 10,000 OR MOR	DEPENDENT CHIL 500 TO 999 SE DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999 \$25,000-OR MORE	
BUSINESS ENTITY STOCK HELD OR A BUSINESS ENTITY STOCK HELD OR A STOCK HELD OR A	RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN \$5,000 S,000 TO 9,999 LESS THAN \$5,000 STATE FILER FILER FILER FILER FILER FILER STATE S	10,000 OR MOR 10,000 OR MOR \$5,000\$9,999 N/ SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000\$9,999	500 TO 999 E \$10,000\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999 \$25,000-OR MORE	
BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF	RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 TARGET FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 YRC WOR	100 TO 499	DEPENDENT CHIL	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999 \$25,000-OR MORE	
BUSINESS ENTITY STOCK HELD OR A BUSINESS ENTITY STOCK HELD OR A STOCK HELD OR A	RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 TARGET FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 YRC WOR FILER LESS THAN 100	100 TO 499	DEPENDENT CHIL	1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999 \$25,000-OR MORE D 1,000 TO 4,999	

Texas Ethics Commission P.	O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-850
BONDS, NOTES & C	OTHER COMMERCIAL PAPER PART 3
NOTAPPLICABLE	
List all bonds, notes, and other c calendar year. If sold, indicate information, see FORM PFSINS	ommercial paper held or acquired by you, your spouse, or a dependent child during the the category of the amount of the net gain or loss realized from the sale. For more TRUCTION GUIDE.
	out a dependent child's activity, indicate the child about whom you are reporting by high the child is listed on the Cover Sheet.
DESCRIPTION OF INSTRUMENT	MANAGED IRA ACCOUNT TREASURY NOTES + BILLS (MANAGED BY FIDELITY)
² HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE
DESCRIPTION OF INSTRUMENT	MANAGED BY FIDELITY)
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000\$9,999 \$10,000-\$24,999 \$25,000-OR MORE
DESCRIPTION OF INSTRUMENT	MANAGED IRA ACCOUNT CASH RESERVES (MANAGED BY FIDELITY)
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	□ LESS THAN \$5,000 □\$5,000\$9,999 □\$10,000\$24,999 □\$25,000OR MORE
СОРУ	AND ATTACH ADDITIONAL PAGES AS NECESSARY

PA	NOTAPPLICABLE
\not	NOTAPPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

providing the number under which the child is listed on the Cover Sheet.					
1 MUTUAL FUND	NAME				
			.·		
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD	
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
OF WICH CALL FUND	☐ 5,000 TO 9,999	10,000 OR MOR	RE		
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
MUTUAL FUND		NA	ME		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
OF MOTORET GND	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
MUTUAL FUND		NA	ME		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
OF MOTORET SAD	5,000 TO 9,999	10,000 OR MOR	E		
IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
COPY	AND ATTACH ADDITIO	NAL PAGES AS NE	CESSARY		

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5 ■ NOTAPPLICABLE List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS SOURCE OF INCOME COMPASS BANK **RECEIVED BY** SPOUSE FILER DEPENDENT CHILD _____ **AMOUNT** \$500--\$4,999 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE NAME AND ADDRESS VELOCITY CREDIT UNION SOURCE OF INCOME RECEIVED BY SPOUSE FILER DEPENDENT CHILD _____ **AMOUNT** \$500--\$4,999 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME VELOCITY CREDIT UNION RECEIVED BY FILER ☐ SPOUSE DEPENDENT CHILD ___ **AMOUNT** \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE \$500--\$4,999 COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

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INCOME FROM INTE	REST, DIVID	ENDS, ROYAL	TIES & RENTS PART 5			
List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFSINSTRUCTION GUIDE.						
When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.						
1 SOURCE OF INCOME	FIDELITY	BROKERAGE	SERVICES			
² RECEIVED BY	FILER	SPOUSE	DEPENDENT CHILD			
3 AMOUNT	\$500\$4,999	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE			
SOURCE OF INCOME	·	NAME AND	ADDRESS			
RECEIVED BY	FILER	SPOUSE	DEPENDENT CHILD			
AMOUNT	\$500\$4,999	\$5,000\$9,999	\$10,000-\$24,999 \$25,000-OR MORE			
SOURCE OF INCOME		NAME AND	ADDRESS			
RECEIVED BY	☐ FILER	SPOUSE	DEPENDENT CHILD			
AMOUNT	\$500\$4,999	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE			
COPY A	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

×	NOTAPPLICABL
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Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

providing the number under which the child is listed on the Cover Sheet.				
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT				
LIABILITY OF	FILER	SPOUSE	DEPENDENT CHILD	
3 GUARANTOR				
4 AMOUNT	\$1,000\$4,999	\$5,000\$9,999	\$10,000-\$24,999 \$25,000-OR MORE	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT			·	
LIABILITY OF	FILER	SPOUSE	DEPENDENT CHILD	
GUARANTOR				
AMOUNT	\$1,000\$4,999	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT				
LIABILITY OF	FILER	SPOUSE	DEPENDENT CHILD	
GUARANTOR				
AMOUNT	\$1,000\$4,999	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE	
COPY A	ND ATTACH ADDIT	IONAL PAGES AS	NECESSARY	

INTERESTS IN REAL	PROPERTY PART 7A	
NOTAPPLICABLE	•	
calendar year. If the interest was so	real property held or acquired by you, your spouse, or a dependent child during the ld, also indicate the category of the amount of the net gain or loss realized from the sale. Interest" and other specific directions for completing this section, see FORM PFS	
	a dependent child's activity, indicate the child about whom you are reporting by he child is listed on the Cover Sheet.	
1 HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD	
2 STREETADDRESS NOTAVAILABLE CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 4516 W. BALCOWES AUSTIN, TX 78731	
³ DESCRIPTION	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	
LOTS ACRES	1 LOT IN TRAVIS COUNTY, TX	
A NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)		
F SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE	
HELD OR ACQUIRED BY	☐FILER ☐ SPOUSE ☐ DEPENDENT CHILD	
STREETADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 439 N. 84 St.	
CHECK IF FILER'S HOME ADDRESS	LOUP CITY, NE 68853	
DESCRIPTION LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 LOT IN SHERMAN COUNTY, NE	
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)		
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY		

INTERESTS IN BUSINESS ENTITIES PART 7B NOTAPPLICABLE

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD
² DESCRIPTION	NAMEAND ADDRESS (Check if Filer's Home Address)
3 IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD
DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address)
_	
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD
DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address)
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-20	70 (512) 463-	5800 1-800-325-850
TRUSTINCOME				PART 9
NOTAPPLICABLE				
Identify each source of income category of the amount of inco than \$500 in income, if the ide When reporting information providing the number under w	ome received. Also identity of the asset is known about a dependent ch	ntify each asset of the true wn. For more information uild's activity, indicate the	st from which the ben I, see FORM PFSIN	eficiary received <i>more</i> ISTRUCTION GUIDE.
1 SOURCE	DELTA P	NAME	OFTRUST MEJUT TRUS	T
² BENEFICIARY	☑ FILER	SPOUSE	DEPENDENT (CHILD
3 INCOME	☐ LESS THAN	\$5,000 \$5,000-\$9,999	\$10,000\$24,999	\$25,000-OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVE	D			
UNKNOWN		·		***************************************
SOURCE	DEPARTME (NAV)	NT OF DEFENS Y RETIREMEN T	OFTRUST E FINANCE : PENSION)	Acct.
BENEFICIARY	∏ FILER	SPOUSE	DEPENDENT (CHILD
INCOME	LESS THAN	\$5,000 \$5,000\$9,999	1 \$10,000\$24,999	\$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVE	D			
☐ UNKNOWN		MINE		. 10.00
SOURCE	500	NAME! AL SEKURITY	OF TRUST	
BENEFICIARY	⊠ FILER	SPOUSE	DEPENDENT O	CHILD
INCOME	LESS THAN	\$5,000	\$10,000\$24,999	\$25,000-OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED)			

GIFTS			PART 8
NOTAPPLICABLE			
describe the gift. Do not include: 1) under chapter 305 of the Government	expenditures required nent Code; 2) political	to be reported by a per contributions reported	rou, your spouse, or a dependent child, and rson required to be registered as a lobbyist d as required by law; or 3) gifts given by a ity. For more information, see FORM PFS-
When reporting information about providing the number under which t			child about whom you are reporting by
1 DONOR		NAME AND	ADDRESS .
² RECIPIENT	FILER	SPOUSE	DEPENDENT CHILD
3 DESCRIPTION OF GIFT			
DONOR	NAME AND ADDRESS		
·			
RECIPIENT	FILER	SPOUSE	DEPENDENT CHILD
DESCRIPTION OF GIFT			
DONOR		NAME AND	ADDRESS
RECIPIENT	FILER	SPOUSE	DEPENDENT CHILD
DESCRIPTION OF GIFT			
COPY A	ND ATTACH ADDIT	ONAL PAGES AS	NECESSARY

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(512) 463-5800

TRUSTEE STATEMENT

PART 10B

NOTA	PPLICABLE
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An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1	NAME OF TRUST	
2	TRUSTEE NAME	
3	FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
4	TRUSTEE STATEMENT	I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.
		Trustee Signature

§ 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
 - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;
 - (14) identification of each blind trust that complies with Subsection (c), including:
 - (A) the category of the fair market value of the trust;
 - (B) the date the trust was created;
 - (C) the name and address of the trustee; and
 - (D) a statement signed by the trustee, under penalty of perjury, stating that:
 - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
 - (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
 - (1) the trustee:
 - (A) is a disinterested party;
 - (B) is not the individual:
 - (C) is not required to register as a lobbyist under Chapter 305;
 - (D) is not a public officer or public employee; and
 - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
 - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

×	NOTAPPLICABLE
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Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

	providing the number under	er which the child is list	ted on the Cover Sheet.		
1	BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address)			
2	BUSINESS TYPE				
3	HELD, ACQUIRED, OR SOLD BY	FILER	SPOUSE	DEPENDENT	CHILD —
4	ASSETS		SCRIPTION	CATE LESS THAN \$5,000 S10,000\$24,999	GORY \$5,000\$9,999 \$25,000-OR MORE
		,		LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
				LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			.,	LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
				LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
				LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE
	·	 - 		LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
				LESS THAN \$5,000	\$5,000\$9,999
	C	OPY AND ATTACH	ADDITIONAL PAGES	AS NECESSARY	

1-800-325-8506

NOTAPPLICABLE

Texas Ethics Commission

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

Austin, Texas 78711-2070

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

providing the number under which the child is listed on the Cover Sheet.				
¹ BUSINESS ASSOCIATION		NAME AND ADDRESS [Check If Filer's Home Address)		
² BUSINESS TYPE				
3 HELD, ACQUIRED, OR SOLD BY	FILER	SPOUSE	DEPENDENT	CHILD ———
4 LIABILITIES	DES	CRIPTION	CATE LESS THAN \$5,000 \$10,000\$24,999	\$5,000\$9,999
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
		 	LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE

Texas Ethics Commission

BOARDS AND EXECUTIVE POSITIONS **PART 12** ☐ NOTAPPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. CAPITAL METRO TRANSPORTATION AUTHORITY **ORGANIZATION** ² POSITION HELD BOARD MEMBER POSITION HELD BY SPOUSE | FILER DEPENDENT CHILD _____ NUNICIPAL SOLID WASTE MANAGEMENT AND RESOURCE **ORGANIZATION** RECOVERY ADVISORY COUNCIL POSITION HELD BOARD MEMBER FILER POSITION HELD BY SPOUSE DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** POSITION HELD BY ☐ FILER SPOUSE DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** FILER SPOUSE POSITION HELD BY DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** ☐ FILER SPOUSE DEPENDENT CHILD _____ POSITION HELD BY COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Austin, Texas 78711-2070

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

Ħ	NOTAPPLICABLE
₩.	

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS
² AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
AMOUNT	
PROVIDER	NAME AND ADDRESS
•	
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

P.O. Box 12070

INTEREST IN BUSINE	ESS IN COMN	MON WITH LO	DBBYIST PART 14
NOTAPPLICABLE			
sional association, joint venture, or	other business assoc erson registered as a	iation, other than a p lobbyist under chapte	partnership, professional corporation, profes- publicly-held corporation, in which you, your or 305 of the Government Code that both have
1 BUSINESS ENTITY			ND ADDRESS
² INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD
BUSINESS ENTITY		NAME A	ND ADDRESS
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD
BUSINESS ENTITY		NAME A	ND ADDRESS
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD
BUSINESS ENTITY		NAME A	ND ADDRESS
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD
BUSINESS ENTITY		NAME AF	ND ADDRESS
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD
COPY AN	ND ATTACH ADDIT	IONAL PAGES AS	S NECESSARY

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 FEES RECEIVED FOR SERVICES RENDERED **PART 15** TO A LOBBYIST OR LOBBYIST'S EMPLOYER NOTAPPLICABLE Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS--INSTRUCTION GUIDE. PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED 2 **FEE CATEGORY** LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED **FEE CATEGORY** LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED **FEE CATEGORY** LESS THAN \$5,000 \[\\$5,000--\\$9,999 \[\\$10,000--\\$24,999 \[\\$25,000--\OR MORE PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED **FEE CATEGORY** LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED **FEE CATEGORY** LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

LESS THAN \$5,000

PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED

FEE CATEGORY

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

REPRESENTATION BY LEGISLATOR BEFORE **PART 16** STATE AGENCY NOTAPPLICABLE This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS-INSTRUCTION GUIDE. Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerial acts on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003. STATE AGENCY PERSON REPRESENTED **FEE CATEGORY** LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000-OR MORE STATE AGENCY PERSON REPRESENTED **FEE CATEGORY** LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE STATE AGENCY PERSON REPRESENTED **FEE CATEGORY** LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000-OR MORE STATE AGENCY PERSON REPRESENTED **FEE CATEGORY** LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 17

À	NOTAPPLICABLE

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS—INSTRUCTION GUIDE.

SOURCE OF BENEFIT	NAME AND ADDRESS
² BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

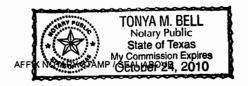
P.O. Box 12070

LEGISLATIVE CONT	INUANCES		PART 18
NOTAPPLICABLE			
and Remedies Code, or under	another law or rule	applied for or obtained under section e that requires or permits a court to or member-elect of the legislature.	
NAME OF PARTY REPRESENTED			
DATE RETAINED			
3 STYLE, CAUSE NUMBER, COURT & JURISDICTION		· · · · · · · · · · · · · · · · · · ·	
DATE OF CONTINUANCE APPLICATION			
5 WAS CONTINUANCE GRANTED?	☐ YES	□ NO	
NAME OF PARTY REPRESENTED			: · · · · · · · · · · · · · · · · · · ·
DATE RETAINED			
STYLE, CAUSE NUMBER, COURT, & JURISDICTION			
DATE OF CONTINUANCE APPLICATION			
WAS CONTINUANCE GRANTED?	☐ YES	□NO	
COPY	AND ATTACH AI	DDITIONAL PAGES AS NECES	SARY

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2007, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.



Sworn to and subscribed before me, by the said <u>her her find well</u>, this the <u>3/6+</u> day of <u>Marcl</u>, 20 <u>DB</u>, to certify which, witness my hand and seal of office.

Signature of office administering oath

Print name of officer administering oath

Title of officer administering oath

Texas Ethics Commission

	PERSON	AL FINANCIAL STATEMENT		FORM	PFS
			C	OVERS	HEET
		n accordance with chapter 572 of the Government Code. ired in 2009, covering calendar year ending December 31, 2008.	TOTAL NUMBER OF PA	GES FILED:	AUSTIN
	Use FOR	M PFSINSTRUCTION GUIDE when completing this form.	ACCOUNT #	23	R C
1	NAME	TITLE; FIRST; MI		USEON	
		Lee	Date Received	. <u>.</u> ယ	$\sim \approx$
·		Leffingwell		55 \$5	ERK
2	ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
		302 W. Ind Street			
		Austin, 17 78701	Receipt #		
		(CHECK IF FILER'S HOME ADDRESS)	HD / PM	Amount	
3	TELEPHONE	AREA CODE PHONE NUMBER; EXTENSION	Date Processed		
	NUMBER	(512) 974-2260	Date Imaged		
4	REASON FOR FILING STATEMENT	EXCANDIDATE Mayor of Austin EXELECTED OFFICER Austin City Council F	Place 1	(INDICA	TE OFFICE)
		ELECTED OFFICER TIMESTITI CON CONTROL TO	<u> </u>	(INDICA	TE OFFICE)
		APPOINTED OFFICER	· · · · · · · · · · · · · · · · · · ·	(INDICAT	E AGENCY)
		EXECUTIVE HEAD	•	(INDICAT	E AGENCY)
		☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT			
		☐ STATE PARTY CHAIR		(INDICA	TE PARTY)
		OTHER		(INDICATE	POSITION)
5	dependent children i	nose financial activity you are reporting (filer must report information about the filer had actual control over that activity): Tulie Byers HILD 1. 2. 3.			pouse or
		8, you will disclose your financial activity during the preceding calendary			

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual contro over that person's financial activity.

Texas Ethics Commission P.	O. Box 12070	Austin, Texas 78711-2070	(512) 463-5800	1-800-325-850
SOURCES OF OCC	JPATION <i>A</i>	AL INCOME		PART 1A
☐ NOTAPPLICABLE				
When reporting information about providing the number under which			child about whom you a	re reporting by
1 INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD	
² EMPLOYMENT		NAME AND ADDRESS OF EM	PLOYER/POSITION HELD Home Address)	
M EMPLOYED BY ANOTHER	City 301	w. 2nd St.		
SELF-EMPLOYED	Hus;	H ₁ , TK 78701 	City Countil 1	Mencher.
INFORMATION RELATES TO	FILER	□ Y spouse	DEPENDENT CHILD	
EMPLOYMENT		NAME AND ADDRESS OF EM	PLOYER / POSITION HELD Home Address)	
M EMPLOYED BY ANOTHE	////3	on Northwest Research Bl	Hospital	
SELF-EMPLOYED		NATURE OF O	Registered Miccupation	use
INFORMATION RELATES TO	☐ FILER	SPOUSE	DEPENDENT CHILD	
EMPLOYMENT		NAME AND ADDRESS OF EM (Check If Filer's		
☐ EMPLOYED BY ANOTHE	R			
		NATURE OF OC	CCUPATION	
COPY	AND ATTACH	ADDITIONAL PAGES AS	NECESSARY	

Austin, Texas 78711-2070 Texas Ethics Commission P.O. Box 12070 1-800-325-8506 **RETAINERS** PART 1B NOTAPPLICABLE This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS FEE RECEIVED FROM NAME OF BUSINESS FEE RECEIVED BY OR FILER'S BUSINESS _____ SPOUSE OR SPOUSE'S BUSINESS -☐ DEPENDENT CHILD OR CHILD'S BUSINESS _ **FEE AMOUNT** ☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000--OR MORE NAME AND ADDRESS FEE RECEIVED FROM NAME OF BUSINESS FEE RECEIVED BY ☐ FILER OR FILER'S BUSINESS __ OR SPOUSE'S BUSINESS _____ ☐ DEPENDENT CHILD OR CHILD'S BUSINESS ___ **FEE AMOUNT** ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE

STOCK					PART 2
NOTAPPLIC	CABLE				
and indicate the ca	tegory of the numb	er of shares held or ac	cquired. If some o	r all of the stock was	uring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the Co		e child about whom	you are reporting by
¹ BUSINESS ENTI	ΓY	STEWAR		H Co.	
² STOCK HELD OR	R ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHI	LD
³ NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☒ 500 TO 999 RE	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	ΤΥ	ANHEUSE	er Busc	AME H	
STOCK HELD OR	ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	ARES	LESS THAN 100	☒ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
	·	☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
IF SOLD	MET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$2 4 ,999	☐ \$25,000OR MORE
			· · · · · · · · · · · · · · · · · · ·		
BUSINESS ENTIT	ſΥ	BRIGGS	Y STRATT	AME DN	
BUSINESS ENTIT		BRIGGS	Y STRATT	AME DI DEPENDENT CHIL	LD
	ACQUIRED BY		4 STRATT	DEPENDENT CHIL	LD 1,000 TO 4,999
STOCK HELD OR	ACQUIRED BY	FILER LESS THAN 100	SPOUSE STRATT	DEPENDENT CHIL	
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN ALL LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999	✓ STRATT □ SPOUSE ✓ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN SANET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	✓ STRATT □ SPOUSE ✓ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN SANET LOSS TY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN SANET LOSS TY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 BROADR	SPOUSE SPOUSE STRATT SPOUSE STORY SPOUSE	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN SANET LOSS TY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 BEARD R FILER LESS THAN 100	SPOUSE SPOUSE STRATT SPOUSE 10,000 OR MOR \$5,000-\$9,999 1065 SPOUSE 100 TO 499	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN ACQUIRED BY ACQUIRED BY ARES NET GAIN INET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ BROAD R ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	SPOUSE SPOUSE 10,000 OR MOR \$5,000-\$9,999 SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 RE	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ D ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	ACQUIRED BY ARES NET GAIN ACQUIRED BY ACQUIRED BY ARES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 PART R FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE SPOUSE 10,000 OR MOR \$5,000-\$9,999 SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN ACQUIRED BY ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER	SPOUSE SPOUSE 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 RE	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN ACQUIRED BY ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 PLOAD R FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 COCA CO	SPOUSE SPOUSE SPOUSE S100 TO 499 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL DEPENDENT CHIL 500 TO 999 SE DEPENDENT CHIL 500 TO 999 SE \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN ACQUIRED BY ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	FILER	SPOUSE SPOUSE S100 TO 499 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL DEPENDENT CHIL 500 TO 999 SE DEPENDENT CHIL 500 TO 999 SE \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE

STOCK PART 2 NOTAPPLICABLE List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 BUSINESS ENTITY SEAGATE TECHNOLOGY 2 STOCK HELD OR ACQUIRED BY T FILER SPOUSE □ DEPENDENT CHILD 1,000 TO 4,999 100 TO 499 500 TO 999 3 NUMBER OF SHARES LESS THAN 100 ¥ 5,000 TO 9,000 V ☐ 10,000 OR MORE 4 IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE ☐ NET LOSS **BUSINESS ENTITY** AMERICAN EXPRESS STOCK HELD OR ACQUIRED BY ☐ SPOUSE X FILER ☐ DEPENDENT CHILD ☐ 100 TO 499 **2** 500 TO 999 1,000 TO 4,999 LESS THAN 100. NUMBER OF SHARES FORD TO SEE U 10.000 OR MORE LL IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000-\$24,999 \$25,000-OR MORE ☐ NET LOSS NAME **BUSINESS ENTITY** APPLIED. MATERIALS ☐ SPOUSE STOCK HELD OR ACQUIRED BY FILER ☐ DEPENDENT CHILD LESS THAN 100 100 TO 499 **3** 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES ☐ 10.000 OR MORE 5,000 TO 9,999 IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE ☐ NET LOSS **BUSINESS ENTITY** AVERY DENISON X FILER SPOUSE ☐ DEPENDENT CHILD STOCK HELD OR ACQUIRED BY LESS THAN 100 100 TO 499 **★** 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES ☐ 10,000 OR MORE 5.000 TO 9.999 IF SOLD ☐ NET GAIN \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE LESS THAN \$5,000 ☐ NET LOSS **BUSINESS ENTITY** BED, BATH, & BEYOND ☐ SPOUSE FILER ☐ DEPENDENT CHILD STOCK HELD OR ACQUIRED BY X 100 TO 499 ☐ 500 TO 999 1,000 TO 4,999 LESS THAN 100 NUMBER OF SHARES ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD ■ NET GAIN LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK					PART 2
☐ NOTAPPLIC	CABLE		•	,	
and indicate the cat	egory of the numb nount of the net	er of shares held or ac	cquired. If some or	r all of the stock was	uring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the C		child about whom	you are reporting by
¹ BUSINESS ENTIT	Y	CDI	CORP "	AME	
² STOCK HELD OR	ACQUIRED BY	⊠ FILER	SPOUSE ,	DEPENDENT CHI	LD
3 NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOF	□ 500 TO 999 Æ	☑ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	Υ	CARMA		AME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	RES	LESS THAN 100	☆ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
	,	☐ 5,000 TO 9,999-	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	Υ	COCACO	LA	AME	
BUSINESS ENTIT	. ,	COCA CO	LA SPOUSE	AME	LD
	ACQUIRED BY	☐ LESS THAN 100	□ SPOUSE □ 100 TO 499	☐ DEPENDENT CHIL	LD 1,000 TO 4,999
STOCK HELD OR	ACQUIRED BY	K FILER	□ SPOUSE	☐ DEPENDENT CHIL	
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000-\$9,999	☐ DEPENDENT CHIL	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	☐ DEPENDENT CHIL	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000 \$9,999	☐ DEPENDENT CHILL	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 COLGATE	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000 \$9,999	DEPENDENT CHILL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHILL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 COLGATO FILER LESS THAN 100	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ PALMOL □ SPOUSE □ 100 TO 499	DEPENDENT CHILL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHILL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET GAIN NET GAIN	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 8E \$10,000-\$24,999 AME VE DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE LD ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET GAIN NET GAIN	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 FALMOL SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	☐ DEPENDENT CHILL	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE LD ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 PALMOL SPOUSE 10,000 OR MOR \$5,000-\$9,999	☐ DEPENDENT CHIL \$\sum_{\text{\texi\text{\text{\text{\text{\text{\text{\text{\tex{	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE LD ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 COLGATE FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 CYMER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	☐ DEPENDENT CHIL \$\sum_{\text{total}} 500 \text{ TO 999} RE ☐ \$10,000-\$24,999 AME ☐ DEPENDENT CHIL \$\sum_{\text{total}} 500 \text{ TO 999} RE ☐ \$10,000-\$24,999 AME ☐ DEPENDENT CHIL ☐ 500 \text{ TO 999}	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	☐ DEPENDENT CHIL \$\sum_{\text{total}} 500 \text{ TO 999} RE ☐ \$10,000-\$24,999 AME ☐ DEPENDENT CHIL \$\sum_{\text{total}} 500 \text{ TO 999} RE ☐ \$10,000-\$24,999 AME ☐ DEPENDENT CHIL ☐ 500 \text{ TO 999}	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE

Texas Ethics Commission

STOCK					PART 2
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and indicate the categ	gory of the numb ount of the net	your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
1 BUSINESS ENTITY		DELL	N.A	AME	
² STOCK HELD OR A	CQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D
³ NUMBER OF SHAR	RES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	1 ,000 TO 4,999
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE
BUSINESS ENTITY	,	DISNEY	WALT CO	DEL	
STOCK HELD OR A	CQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHAR	RES	LESS THAN 100	☐ 100 TO 499	反 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	IE .	
IF SOLD [NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTITY		DIXIE C	FROUP	AME	
BUSINESS ENTITY STOCK HELD OR A		DIXIC (SPOUSE	DEPENDENT CHI	LD
	CQUIRED BY		PROUP	DEPENDENT CHIL	LD 1,000 TO 4,999
STOCK HELD OR A NUMBER OF SHAR IF SOLD	CQUIRED BY	FILER	SPOUSE 100 TO 499	DEPENDENT CHIL	
STOCK HELD OR A NUMBER OF SHAR IF SOLD	ACQUIRED BY RES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL	☑ 1,000 TO 4,999
STOCK HELD OR A NUMBER OF SHAR IF SOLD	ACQUIRED BY RES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000-\$24,999	☐ \$25,000OR MORE
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY	ACQUIRED BY RES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 Du Pont	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	☐ DEPENDENT CHII ☐ 500 TO 999 RE ☐ \$10,000-\$24,999 AME MEMOURS	☐ \$25,000OR MORE
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 DU PONT	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE	DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 DU PONT FILER LESS THAN 100	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 100 TO 499	DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAR	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 DU PONT FILER LESS THAN 100 5,000 TO 9,999	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 E DE SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999 AME PERIOURS DEPENDENT CHILD 500 TO 999 RE	1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAR IF SOLD [ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 E DE SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHILL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHILL 500 TO 999 RE \$10,000-\$24,999	1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999 \$25,000-OR MORE
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAR IF SOLD IF SOLD BUSINESS ENTITY	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN NET LOSS	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 ELECTRIC N	DEPENDENT CHILD 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999 RE \$10,000-\$24,999 AME	1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999 \$25,000-OR MORE
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN \$5,000 5,000 TO 9,999 LESS THAN \$5,000 EMOKS N	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 ELECTRIC SPOUSE	DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999 \$25,000-OR MORE
STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAR IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET GAIN NET GAIN NET LOSS	FILER	SPOUSE 100 TO 499 10,000 OR MOR SF,000-\$9,999 SF,000-\$9,000-\$	DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999 AME DEPENDENT CHILD 500 TO 999 AME DEPENDENT CHILD 500 TO 999 AME	1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999 \$25,000-OR MORE

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and indicate the ca	itegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
1 BUSINESS ENTI	ΤΥ	ETHAN	ALLEN "	AME	
² STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
³ NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	⊠ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000—\$24,999	☐ \$25,000-OR MORE
BUSINESS ENTI	ΤΥ . ;	FEDEX	NA	AME	
STOCK HELD OF	R ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	
NUMBER OF SHA	ARES .	LESS THAN 100	☎ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	•
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTI	ſΥ	GANNET	CO NA	ME	
STOCK HELD OF	ACQUIRED BY	T FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 T.O 499	☐ 500 TO 999	1,000 TO 4,999
NOMBER OF STA	11120	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN ☐ NET LOSS	5,000 TO 9,999	☐ 10,000 OR MOR ☐ \$5,000\$9,999	□ \$10,000\$24,999	☐ \$25,000–OR MORE
	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	
IF SOLD BUSINESS ENTIT	NET GAIN NET LOSS TY RACQUIRED BY	LESS THAN \$5,000	□\$5,000-\$9,999 C ELECT	□ \$10,000\$24,999	
IF SOLD BUSINESS ENTIT	NET GAIN NET LOSS TY RACQUIRED BY	LESS THAN \$5,000	□ \$5,000-\$9,999	□ \$10,000\$24,999 ME	.D
IF SOLD BUSINESS ENTIT	NET GAIN NET LOSS TY RACQUIRED BY	LESS THAN \$5,000	\$5,000-\$9,999 **C ELECTO SPOUSE 100 TO 499	□ \$10,000\$24,999 ME	.D
BUSINESS ENTITESTOCK HELD OF NUMBER OF SHA	NET GAIN NET LOSS NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS	LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	\$5,000-\$9,999 **CELECTO** SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	□ \$10,000\$24,999 ME ✓ / C □ DEPENDENT CHIL □ 500 TO 999 E □ \$10,000\$24,999	_D 1,000 TO 4,999
BUSINESS ENTITE STOCK HELD OF NUMBER OF SHA	NET GAIN NET LOSS NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS	LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	\$5,000-\$9,999 SPOUSE 10,000 OR MOR \$5,000-\$9,999	□ \$10,000\$24,999 ME ✓ / C □ DEPENDENT CHIL □ 500 TO 999 E □ \$10,000\$24,999	_D ☑ 1,000 TO 4,999 ☐ \$25,000-OR MORE
BUSINESS ENTITE STOCK HELD OF NUMBER OF SHA	NET GAIN NET LOSS RACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY RACQUIRED BY	LESS THAN \$5,000 GENERA LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	\$5,000-\$9,999 ELECT SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	□ \$10,000\$24,999 ME	_D ☑ 1,000 TO 4,999 ☐ \$25,000-OR MORE
BUSINESS ENTITE STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTITE STOCK HELD OF	NET GAIN NET LOSS RACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY RACQUIRED BY	LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 GENERA	\$5,000-\$9,999 CELECTO SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	□ \$10,000\$24,999 ME	_D 1,000 TO 4,999 \$25,000-OR MORE
BUSINESS ENTITE STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTITE STOCK HELD OF	NET GAIN NET LOSS RACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY RACQUIRED BY	LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100	\$5,000-\$9,999 ELECTA SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 SPOUSE SPOUSE	□ \$10,000\$24,999 ME	_D

STOCK					PART 2
NOTAPPLIC	CABLE				
and indicate the ca	itegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	TY	HELMERIC	H & PAY	AME UE	· · · · · · · · · · · · · · · · · · ·
² STOCK HELD OF	R ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	.D
3 NUMBER OF SH	ARES	LESS THAN 100	₩ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
_		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTI	TY	HUTCHINS	ON TELH		
STOCK HELD OF	R ACQUIRED BY	K FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000~OR MORE
	☐ NET LOSS				
BUSINESS ENTI		ILLINOIS T	TOOL WKS	AME	
BUSINESS ENTI	TY	ILLINOIS T	SPOUSE	DEPENDENT CHIL	.D
	TY R ACQUIRED BY		POL WKS		_D ☐ 1,000 TO 4,999
STOCK HELD OF	TY R ACQUIRED BY	K FILER	SPOUSE	DEPENDENT CHIL	
STOCK HELD OF	TY R ACQUIRED BY	FILER LESS THAN 100	□ SPOUSE □ 100 TO 499	DEPENDENT CHIL	
STOCK HELD OF	R ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL	☐ 1,000 TO 4,999
STOCK HELD OF NUMBER OF SHA	TY R ACQUIRED BY ARES INET GAIN INET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 RE ☐ \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTI	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTI-	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ SPOUSE □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 8E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTI-	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ MATION ☐ FILER ☐ LESS THAN 100	□ SPOUSE □ 10,000 OR MOR □ \$5,000—\$9,999 □ SPOUSE □ 100 TO 499	DEPENDENT CHIL 500 TO 999 8E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN NET GAIN	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000—\$9,999 □ 10,000 OR MOR □ 10,000 OR MOR □ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 8E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE D 1,000 TO 4,999
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF NUMBER OF SHA IF SOLD	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000—\$9,999 □ 10,000 OR MOR □ 10,000 OR MOR □ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 8E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 8E \$10,000-\$24,999	□ 1,000 TO 4,999 □ \$25,000OR MORE □ \$25,000OR MORE □ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY R ACQUIRED BY	FILER	SPOUSE SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME	□ 1,000 TO 4,999 □ \$25,000OR MORE □ \$25,000OR MORE □ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY R ACQUIRED BY	FILER	□ SPOUSE □ SPOUSE □ 10,000 OR MOR □ \$5,000—\$9,999 NOR □ 10,000 OR MOR □ 10,000 OR MOR □ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	□ 1,000 TO 4,999 □ \$25,000OR MORE □ \$1,000 TO 4,999 □ \$25,000OR MORE □ \$25,000OR MORE
STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OF	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS TY R ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000—\$9,999 □ 10,000 OR MOR □ \$5,000—\$9,999 □ 10,000 OR MOR □ \$5,000—\$9,999	DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	□ 1,000 TO 4,999 □ \$25,000OR MORE □ \$1,000 TO 4,999 □ \$25,000OR MORE □ \$25,000OR MORE

STOCK					PART 2
☐ NOTAPPLIC	CABLE				
and indicate the ca	itegory of the numb mount of the net		equired. If some o	r all of the stock was	ring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the C		child about whom	you are reporting by
¹ BUSINESS ENTI	TY	KEMET	CORP "	AME	
² STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
_		☐ 5,000 TO 9,999	10,000 OR MOF	RE	
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
BUSINESS ENTI	ΤΥ	LEGGET	T & PLA	AME TT	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE .	DEPENDENT CHIL	LD
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	ΓΥ	MDC H	101265	AME	
BUSINESS ENTIT	·	MOC 14	DLD I X J G S N. D. SPOUSE	DEPENDENT CHIL	_D
	R ACQUIRED BY		101265		_D ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	R ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	
STOCK HELD OR	R ACQUIRED BY	FILER LESS THAN 100	□ SPOUSE □ 100 TO 499	DEPENDENT CHIL	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	☐ DEPENDENT CHILE ☐ 500 TO 999 RE ☐ \$10,000-\$24,999	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	☐ DEPENDENT CHILE ☐ 500 TO 999 RE ☐ \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS TY RACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	☐ DEPENDENT CHILE ☐ 500 TO 999 RE ☐ \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS TY RACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MAKSH *	□ SPOUSE □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	□ DEPENDENT CHIL □ 500 TO 999 RE □ \$10,000-\$24,999 □ DEPENDENT CHIL □ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS TY RACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MAKSH * FILER LESS THAN 100	□ SPOUSE □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 100 TO 499	□ DEPENDENT CHIL □ 500 TO 999 RE □ \$10,000-\$24,999 □ DEPENDENT CHIL □ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MAKSH ** FILER LESS THAN 100 5,000 TO 9,999	□ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	□ DEPENDENT CHIL □ 500 TO 999 RE □ \$10,000-\$24,999 □ DEPENDENT CHIL ■ 500 TO 999	1,000 TO 4,999 \$25,000—OR MORE D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	R ACQUIRED BY ARES NET GAIN NET LOSS TY R ACQUIRED BY ARES NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MAKSH ** FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	□ DEPENDENT CHIL □ 500 TO 999 RE □ \$10,000-\$24,999 □ DEPENDENT CHIL ■ 500 TO 999 RE □ \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ \$25,000—OR MORE ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	R ACQUIRED BY ARES NET GAIN NET LOSS TY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MAKSH ** FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	□ DEPENDENT CHIL □ 500 TO 999 RE □ \$10,000-\$24,999 AME □ DEPENDENT CHIL ■ 500 TO 999 RE □ \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ \$25,000—OR MORE ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	R ACQUIRED BY ARES NET GAIN NET LOSS TY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER	SPOUSE SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	□ DEPENDENT CHIL □ 500 TO 999 RE □ \$10,000-\$24,999 □ DEPENDENT CHIL □ \$500 TO 999 RE □ \$10,000-\$24,999 AME □ DEPENDENT CHIL □ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE D ☐ \$25,000—OR MORE ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	R ACQUIRED BY ARES NET GAIN NET LOSS TY ARES NET GAIN NET LOSS TY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ \$5,000-\$9,999 □ SPOUSE □ 100 TO 499 □ 100 TO 499	□ DEPENDENT CHIL □ 500 TO 999 RE □ \$10,000-\$24,999 □ DEPENDENT CHIL □ \$500 TO 999 RE □ \$10,000-\$24,999 AME □ DEPENDENT CHIL □ 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE D \$25,000-OR MORE \$25,000-OR MORE

STOCK					PART 2
NOTAPPLICABLE					
List each business entity and indicate the category category of the amount INSTRUCTION GUIDE.	y of the numb	er of shares held or ac	quired. If some or	all of the stock was	sold, also indicate the
When reporting informa providing the number und				child about whom	you are reporting by
¹ BUSINESS ENTITY		MICROS		AME	
² STOCK HELD OR ACC	QUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
³ NUMBER OF SHARES	3	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
=	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTITY		NEWELL	Rusowem	AME AID	
STOCK HELD OR ACC	QUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHARES	3	LESS THAN 100	☐ 100 TO 499	₩ 500 TO 999	☐ 1,000 TO 4,999
·		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
<u>=</u>	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTITY		NEWPORT	NA	AME	
		NEWPORT	NA ☐ SPOUSE		LD
BUSINESS ENTITY	QUIRED BY	☐ LESS THAN 100	<u></u>	DEPENDENT CHIL	LD M 1,000 TO 4,999
BUSINESS ENTITY STOCK HELD OR ACCO NUMBER OF SHARES IF SOLD	QUIRED BY	[] FILER	☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL	
BUSINESS ENTITY STOCK HELD OR ACCO NUMBER OF SHARES IF SOLD	QUIRED BY	☐ LESS THAN 100☐ 5,000 TO 9,999☐	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL	1,000 TO 4,999
BUSINESS ENTITY STOCK HELD OR ACC NUMBER OF SHARES IF SOLD	QUIRED BY S NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 RE ☐ \$10,000—\$24,999	1,000 TO 4,999 \$25,000-OR MORE
BUSINESS ENTITY STOCK HELD OR ACCONUMBER OF SHARES IF SOLD	QUIRED BY S NET GAIN NET LOSS QUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	1,000 TO 4,999 \$25,000-OR MORE
BUSINESS ENTITY STOCK HELD OR ACCO NUMBER OF SHARES IF SOLD	QUIRED BY S NET GAIN NET LOSS QUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ \$5,000-\$9,999 □ SPOUSE	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	\$25,000-OR MORE
BUSINESS ENTITY STOCK HELD OR ACCOUNTY IF SOLD BUSINESS ENTITY STOCK HELD OR ACCOUNTY STOCK HELD OR ACCOUNTY NUMBER OF SHARES	QUIRED BY S NET GAIN NET LOSS QUIRED BY	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000–\$9,999 □ SPOUSE □ 100 TO 499	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	\$25,000-OR MORE
BUSINESS ENTITY STOCK HELD OR ACCOUNTY IF SOLD BUSINESS ENTITY STOCK HELD OR ACCOUNTY STOCK HELD OR ACCOUNTY NUMBER OF SHARES	QUIRED BY NET GAIN NET LOSS QUIRED BY	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 N/2 SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	\$25,000-OR MORE LD 1,000 TO 4,999
BUSINESS ENTITY STOCK HELD OR ACCONUMBER OF SHARES IF SOLD	QUIRED BY NET GAIN NET GAIN NET GAIN NET LOSS	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 N/2 SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	1,000 TO 4,999 □ \$25,000−OR MORE LD 1,000 TO 4,999 □ \$25,000−OR MORE
BUSINESS ENTITY STOCK HELD OR ACCOMUMBER OF SHARES IF SOLD	QUIRED BY NET GAIN NET LOSS QUIRED BY S NET GAIN NET LOSS	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME	1,000 TO 4,999 □ \$25,000−OR MORE LD 1,000 TO 4,999 □ \$25,000−OR MORE
BUSINESS ENTITY STOCK HELD OR ACCOMUMBER OF SHARES IF SOLD BUSINESS ENTITY STOCK HELD OR ACCOMUMBER OF SHARES IF SOLD BUSINESS ENTITY BUSINESS ENTITY STOCK HELD OR ACCOMUMBER OF SHARES	QUIRED BY NET GAIN NET LOSS QUIRED BY S NET GAIN NET LOSS	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE LD \$1,000 TO 4,999 \$25,000-OR MORE
BUSINESS ENTITY STOCK HELD OR ACCONUMBER OF SHARES IF SOLD	QUIRED BY NET GAIN NET LOSS QUIRED BY S NET GAIN NET LOSS	FILER	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 SPOUSE 10,000 OR MOR \$5,000-\$9,999 SPOUSE SPOUSE 100 TO 499 10,000 OR MOR SPOUSE 100 TO 499 100 TO 490 100 TO 4	DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 RE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999	1,000 TO 4,999 \$25,000-OR MORE LD \$1,000 TO 4,999 \$25,000-OR MORE

STOCK					PART 2
NOTAPPLIC	CABLE				
and indicate the car	tegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTIT	Υ	PRUCTUR +	GAMBLE	AME	
² STOCK HELD OR	ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	Υ	SECTOR "	SPPR FIN	AME ANCIAL	,
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	ARES .	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
	☐ NET LOSS				
BUSINESS ENTIT		TALBOTS	NA NA	AME	
BUSINESS ENTIT	Υ	TALBOTS	□ SPOUSE	AME DEPENDENT CHIL	_D
	ACQUIRED BY	FILER LESS THAN 100	. * * ·	DEPENDENT CHIL	_D ✓ 1,000 TO 4,999
STOCK HELD OR	ACQUIRED BY	FILER LESS THAN 100	☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL	
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100☐ 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000-\$9,999	DEPENDENT CHIL	☑ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100☐ 5,000 TO 9,999☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E 15 \$10,000-\$24,999	☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	☐ \$25,000-OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ STAN \$5,000 ☐ LESS THAN \$5,000 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ S FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 N/ □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999	☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 N/ □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 EE \$10,000-\$24,999	☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES ACQUIRED BY ARES	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MILES THAN \$5,000 MILES THAN 100 5,000 TO 9,999 LESS THAN \$5,000 MILES THAN	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 N/ □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 AME DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES ACQUIRED BY ARES	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 NA □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 ARCEL SE	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	☐ \$25,000—OR MORE D ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES ACQUIRED BY ARES	FILER	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ 10,000 OR MOR □ \$5,000-\$9,999 □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHIL 500 TO 999	□ \$25,000-OR MORE □ \$25,000-OR MORE □ 1,000 TO 4,999 □ \$25,000-OR MORE □ 1,000 TO 4,999 □ 1,000 TO 4,999

Texas Ethics Commiss	ion P.O. Bo	ox 12070 Austin,	, Texas 78711-207	0 (512) 463-5	5800 1-800-325-8506
STOCK					PART 2
NOTAPPLIC	ABLE				
and indicate the cat	tegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's acc child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTIT	Υ	CURRONCY		ame Euro	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	☐ DEPENDENT CHIL	D
3 NUMBER OF SHA	ARES	LESS THAN 100	☎ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
BUSINESS ENTIT	Y	DERTA A	IK LINES	AME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	ARES	☑ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
BUSINESS ENTIT	Υ	KIMBERLY	CLARK	AME	
STOCK HELD OR	ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	ARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE ·	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	Υ	TALBOTS	N.	AME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NDE0		⊠ 100 TO 400	☐ 500 TO 999	☐ 1 000 TO 4 999

BUSINESS ENTITY	KIMBERLY	CLARK			
STOCK HELD OR ACQUIRED B	Y K FILER	SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE ·		
IF SOLD ☐ NET GAIN	LESS THAN \$5,000	5,000-\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
☐ NET LOSS					
BUSINESS ENTITY	TALBOTS	N/	AME		
STOCK HELD OR ACQUIRED E	Y FILER	SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR),000 OR MORE		
IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE	
☐ NET LOSS					
BUSINESS ENTITY	UNITED H	CALTHGEOU	AME		
STOCK HELD OR ACQUIRED E	Y FILER	SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE		
IF SOLD	LESS THAN \$5,000	S5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE	
NET LOSS					
	COPY AND ATTACH ADDITIO	<u>NAL PAGES AS NE</u>	CESSARY		
				Revised 12/01/2008	

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STOCK					PART 2
NOTAPPLI	CABLE				_
and indicate the ca	itegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	TY	UNITED	HEALTH "	AME	
² STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	D
³ NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTI	TY	WALMART	STORES N	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	D
NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	X 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
BUSINESS ENTI	TY	WALGREE	_א ע	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	_D
NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
:		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000—\$9,999	\$10,000 -\$24,999	☐ \$25,000OR MORE
BUSINESS ENTI	TY	Weres FAI	260 N	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	☐ DEPENDENT CHI	D
NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTI	TY	YRC WOLL	DWIDE	AME	
STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	.D
NUMBER OF SH	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	X 1,000 TO 4,999
				· ·	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	☐ \$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE

Texas Ethics Commission

STOCK					PART 2
☐ NOTAPPLIC	ABLE				
and indicate the cat	tegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co	over Sheet.		you are reporting by
¹ BUSINESS ENTIT	Y	ILLINOIS	Tool a	KS	
² STOCK HELD OR	ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	D
³ NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	100 TO 499 □ 10,000 OR MOR	☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD	MET GAIN ☐ NET LOSS	₹ LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	Υ	OFFICE	DEPOT	AME	
STOCK HELD OR	ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	ARES	LESS THAN 100	Ճ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN NET LOSS	K LESS THAN \$5,000	\$5,000 — \$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
	NEI LOSS				
BUSINESS ENTIT		CENTRA		OF CANA	OA
BUSINESS ENTIT	Y .	CENTRA M FILER			
	ACQUIRED BY		L TUND	DEPENDENT CHIL	
STOCK HELD OR	ACQUIRED BY	FILER LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHIL	.D
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES MARES MARET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHIL	LD 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES MET GAIN NET LOSS	FILER LESS THAN 100 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000-\$24,999	1,000 TO 4,999 ☐ \$25,000-OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHILL DEPENDENT CHILL 500 TO 999 E \$10,000-\$24,999	1,000 TO 4,999 ☐ \$25,000-OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000—\$9,999	DEPENDENT CHILD DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHILD DEPENDENT CHILD 500 TO 999	LD 1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100	□ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 N/ □ SPOUSE □ 100 TO 499	DEPENDENT CHILD DEPENDENT CHILD 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHILD DEPENDENT CHILD 500 TO 999	LD 1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 N/ □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHILD \$ 500 TO 999 RE \$ 10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999 RE	LD 1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	ACQUIRED BY ARES ARES ARES ARES ACQUIRED BY ACQUIRED BY ARES ACQUIRED BY ARES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000-\$9,999 N/ □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHILD 500 TO 999 EE \$10,000-\$24,999 AME DEPENDENT CHILD 500 TO 999 RE \$10,000-\$24,999	LD
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STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES ARES ARES ACQUIRED BY ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES	FILER	□ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999 N/ □ SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHILD DEPENDENT CHIL	LD 1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999 \$25,000-OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES ARES ARES ACQUIRED BY ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ARES	FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN \$5,000	SPOUSE SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 NO 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999 NO SPOUSE 100 TO 499 100 TO 499	DEPENDENT CHILD S00 TO 999 RE \$10,000-\$24,999 AME \$500 TO 999 RE \$10,000-\$24,999 AME \$10,000-\$24,999 AME \$10,000-\$24,999 AME \$500 TO 999 RE \$500 TO 999	LD 1,000 TO 4,999 \$25,000-OR MORE LD 1,000 TO 4,999 \$25,000-OR MORE

STOCK					PART 2
NOTAPPLIC	CABLE				
and indicate the ca	tegory of the number mount of the net	er of shares held or ac	equired. If some or	all of the stock was	uring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTIT	ΪΥ	BRIGGS	+ STRA	AME Tron	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
³ NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 10,000 OR MOR	☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	☑ LESS THAN \$5,000	\$5,000\$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	ſΥ	STEWN	ART WY	ME O	
STOCK HELD OR	ACQUIRED BY	FILER	⊠ SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	ARES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN MET LOSS	☐ LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000OR MORE
	MEI LOSS				
BUSINESS ENTIT		TARGET	. N/	AME	
BUSINESS ENTIT	Ý	TARGET	. N/	DEPENDENT CHI	LD
	ACQUIRED BY	FILER LESS THAN 100		DEPENDENT CHII	LD ☐ 1,000 TO 4,999
STOCK HELD OR	ACQUIRED BY	FILER LESS THAN 100	SPOUSE 2400 TO 499	DEPENDENT CHII	
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ \$5,000-\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES MET GAIN NET LOSS	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ \$5,000-\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES ARES ARET GAIN NET LOSS TY ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 YRC Wa	☐ \$5,000-\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES ARES ARET GAIN NET LOSS TY ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☑ LESS THAN \$5,000 ☐ FILER	SPOUSE 10,000 OR MOR 15,000-\$9,999 CLUUIDE	DEPENDENT CHII 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHII 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES ARES ARET GAIN NET LOSS TY ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☑ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100	SPOUSE 10,000 OR MOR 10,000 -\$9,999 \$5,000-\$9,999 CLUUIDE SPOUSE 100 TO 499	DEPENDENT CHII 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHII 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ D
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES PARES ACQUIRED BY ACQUIRED BY ARES NET GAIN ARES NET GAIN ARES	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	SPOUSE	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999 DEPENDENT CHII 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE LD ☐ 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	ACQUIRED BY ARES NET GAIN NET LOSS ACQUIRED BY ARES NET GAIN NET GAIN NET GAIN NET GAIN	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	SPOUSE	DEPENDENT CHII 500 TO 999 E \$10,000\$24,999 DEPENDENT CHII 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE LD ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES PARES ACQUIRED BY ACQUIRED BY ARES NET GAIN ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	SPOUSE 10,000 TO 499 10,000 OR MOR \$5,000-\$9,999 20 CLUUIDE SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHII 500 TO 999 E \$10,000-\$24,999 DEPENDENT CHII 500 TO 999 E \$10,000-\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE LD ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES PARES ACQUIRED BY ACQUIRED BY ARES NET GAIN ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	SPOUSE MOR 10,000 OR MOR \$5,000-\$9,999 MOR 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999 NA	DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 DEPENDENT CHILD 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES PARES ACQUIRED BY ACQUIRED BY ARES NET GAIN ACQUIRED BY ARES ACQUIRED BY ARES ACQUIRED BY ACQUIRED BY ACQUIRED BY ACQUIRED BY	☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ FILER ☐ LESS THAN \$5,000	SPOUSE 10,000 OR MOR \$5,000-\$9,999 SPOUSE 10,000 OR MOR 10,000 OR MOR \$5,000-\$9,999	DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 DEPENDENT CHILD 500 TO 999 E \$10,000\$24,999 DEPENDENT CHILD 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000—OR MORE

P.O. Box 12070

BONDS, NOTES & O	THER COMMERCIAL PAPER	PART 3
NOTAPPLICABLE		
	nmmercial paper held or acquired by you, your spouse, or a dependent of the category of the amount of the net gain or loss realized from the sa RUCTION GUIDE.	
	ut a dependent child's activity, indicate the child about whom you are the child is listed on the Cover Sheet.	e reporting by
DESCRIPTION OF INSTRUMENT	MANAGED IRA ACCOUNT TREASUR + BILLS (Managed by Fidelity)	RyNote
² HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD	
3 IF SOLD		
☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,	,000OR MORE
NET LOSS		
DESCRIPTION OF INSTRUMENT	MANAGED IRA ACCOUNT CORPORATE (MANAGED by Fidelity)	BONDS
HELD OR ACQUIRED BY		 .
IF SOLD		
☐ NET GAIN	LESS THAN \$5,000 S5,000\$9,999 S10,000\$24,999 S25,	000OR MORE
☐ NET LOSS		
DESCRIPTION OF INSTRUMENT	MANAGED IRA ACCOUNT CASH RESE (Managed by Fidelity)	ERUES
HELD OR ACQUIRED BY		
IF SOLD ☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,	000OR MORE
☐ NET LOSS		
COPY A	AND ATTACH ADDITIONAL PAGES AS NECESSARY	

MUTUAL FUNDS

PART 4

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS—INSTRUCTION GUIDE.

P.O. Box 12070

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

providing the number under which the child is listed on the Cover Sheet.				
1 MUTUAL FUND		N/	ME .	
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999 ☐ 1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
4 IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE	
MUTUAL FUND		NA NA	ME.	
		. •		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999 ☐ 1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE	
MUTUAL FUND		ŅA	ME	
			_	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999 ☐ 1,000 TO 4,999	
O, 1110 107 12 1 0110	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999 \$25,000-OR MORE	
☐ NET LOSS				
СОРУ	AND ATTACH ADDITIO	NAL PAGES AS NE	CESSARY	

INCOME PROM INTE	KESI, DIVIDE	ENDS, RUTA	LIIES & KENIS PART 5		
NOTAPPLICABLE					
List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS—INSTRUCTION GUIDE.					
When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.					
SOURCE OF INCOME	Velocity 505 Back		DADDRESS KRION Austin 78704		
² RECEIVED BY	FILER	SPOUSE	DEPENDENT CHILD		
3 AMOUNT	□ \$500\$4,999	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
SOURCE OF INCOME	Velocite 505 Back		DADDRESS LAUDY Pastin 78704		
RECEIVED BY	☐ FILER	⊠ spouse	DEPENDENT CHILD		
AMOUNT	\$500\$4,999	\$5,000-\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
SOURCE OF INCOME	Fidelite	Brokera	Sesvices		
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD		
AMOUNT	\$500\$4,999	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
COPY A	ND ATTACH ADDIT	IONAL PAGES AS	NECESSARY		

AMOUNT

Austin, Texas 78711-2070

1-800-325-8506 PERSONAL NOTES AND LEASE AGREEMENTS PART 6 NOTAPPLICABLE Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF ☐ FILER SPOUSE ☐ DEPENDENT CHILD ____ **GUARANTOR** \$5.000--\$9.999 \$10.000--\$24.999 \$25.000--OR MORE **AMOUNT** \$1,000--\$4,999 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF ☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ **GUARANTOR AMOUNT** \$1,000--\$4,999 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF ☐ FILER SPOUSE ☐ DEPENDENT CHILD _____ **GUARANTOR**

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

\$1,000--\$4,999

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

Texas Ethics Commission P.O.	Box 12070	Austin, Texas 78711-2070	(512) 463-5800	1-800-325-8506
INTERESTS IN REAL	PROPERT	Υ		PART 7A
NOTAPPLICABLE				
Describe all beneficial interests in calendar year. If the interest was so For an explanation of "beneficial in INSTRUCTION GUIDE. When reporting information about providing the number under which the same and th	ld, also indicate the nterest" and other a dependent chi	e category of the amount of the r specific directions for comp ild's activity, indicate the chi	e net gain or loss realized pleting this section, see	d from the sale. FORM PFS
1 HELD OR ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD	
2 STREETADDRESS NOTAVAILABLE CHECK IF FILER'S HOME ADDRESS		STREET ADDRESS, INCLUDING CIT Balcones Dr. 1, TR 78731	ry, county, and state	
3 DESCRIPTION ☑ LOTS ☐ ACRES	Ohe i	NUMBER OF LOTS OR ACRES AND NAME		¥
A NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)				
F SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000 🗌 \$5,000\$9,999 🔲	\$10,000\$24,999	5,000OR MORE
HELD OR ACQUIRED BY	FILER	Æ spouse	DEPENDENT CHILD	
STREET ADDRESS NOTAVAILABLE CHECK IF FILER'S HOME ADDRESS	439 1 Loup	street address, including city. 845. 54. 6885		
DESCRIPTION LOTS ACRES	One 10	NUMBER OF LOTS OR ACRES AND NAME	_	E
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)				
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000	\$10,000-\$24,999	5,000OR MORE

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 INTERESTS IN BUSINESS ENTITIES PART 7B NOTAPPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. HELD OR ACQUIRED BY ☐ FILER SPOUSE ■ DEPENDENT CHILD _____ NAME AND ADDRESS DESCRIPTION (Check If Filer's Home Address) ³ IF SOLD LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000-OR MORE ☐ NET GAIN ☐ NET LOSS HELD OR ACQUIRED BY ☐ FILER SPOUSE DEPENDENT CHILD ____ NAME AND ADDRESS (Check If Filer's Home Address) DESCRIPTION IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000-OR MORE ■ NET GAIN ☐ NET LOSS HELD OR ACQUIRED BY ☐ FILER SPOUSE ☐ DEPENDENT CHILD _____ NAME AND ADDRESS DESCRIPTION (Check If Filer's Home Address) IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ NET GAIN ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission P.O.	D. Box 12070	Austin, Texas 78711-2070	(512) 463-5800	1-800-325-8506	
GIFTS				PART 8	
X NOTAPPLICABLE					
Identify any person or organization that has given a gift worth more than \$250 to you, your spouse, or a dependent child, and describe the gift. The description of a gift of cash or a cash equivalent, such as a negotiable instrument or gift certificate, must include a statement of the value of the gift. Do not include: 1) expenditures required to be reported by a person required to be registered as a lobbyist under chapter 305 of the Government Code; 2) political contributions reported as required by law; or 3) gifts given by a person related to the recipient within the second degree by consanguinity or affinity. For more information, see FORM PFSINSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by					
providing the number under which	The Citing is listed to	NAME AND AD	DRESS		
DONOR					
² RECIPIENT	☐ FILER	SPOUSE	DEPENDENT CHILD		
DESCRIPTION OF GIFT		·			
DONOR		NAME AND ADD	DRESS	-	
DONOR					
RECIPIENT	☐ FILER	☐ SPOUSE	DEPENDENT CHILD		
DESCRIPTION OF GIFT					
DONOR		NAME AND ADD	DRESS		
RECIPIENT	☐ FILER	SPOUSE [DEPENDENT CHILD		

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

DESCRIPTION OF GIFT

UNKNOWN

BLIND TRUSTS			PART 10A	
NOTAPPLICABLE				
Identify each blind trust that complies with section 572.023(c) of the Government Code. See FORM PFSINSTRUCTION GUIDE.				
When reporting information abou providing the number under which			e child about whom you are reporting by	
1 NAME OF TRUST				
² TRUSTEE		NAME AN	D ADDRESS	
³ BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD	
⁴ FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000-OR MORE	
5 DATE CREATED				
NAME OF TRUST				
TRUSTEE	NAME AND ADDRESS			
BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE	
DATE CREATED				
NAME OF TRUST				
TRUSTEE		NAME AN	D ADDRESS	
BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE	
DATE CREATED	·			
CODY A	NO ATTACH ADDITIC	MAL DACES AS	NECECOADY	

TRUSTEE STATEMENT

P.O. Box 12070

PART 10B

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1 NAME OF TRUST	
2 TRUSTEE NAME	
3 FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
4 TRUSTEE STATEMENT	I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.
	Trustee Signature

§ 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
 - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;
 - (14) identification of each blind trust that complies with Subsection (c), including:
 - (A) the category of the fair market value of the trust;
 - (B) the date the trust was created;
 - (C) the name and address of the trustee; and
 - (D) a statement signed by the trustee, under penalty of perjury, stating that:
 - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
 - (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
 - (1) the trustee:
 - (A) is a disinterested party;
 - (B) is not the individual;
 - (C) is not required to register as a lobbyist under Chapter 305;
 - (D) is not a public officer or public employee; and
 - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
 - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

	CIATIONS		PART 11A
ssociation, joint ventur sold 50 percent or mo	e, or other business as re of the outstanding o	sociation in which you, your spo wnership and indicate the categ	ouse, or a depen-
		te the child about whom you	are reporting by
☐ FILER	SPOUSE	DEPENDENT CHILD	·
DESC	RIPTION	\$10,000\$24,999	\$5,000\$9,999 \$25,000OR MORE \$5,000\$9,999 \$25,000OR MORE \$5,000\$9,999
	n corporation, firm, parsociation, joint venture sold 50 percent or mormation, see FORM Pfor about a dependent which the child is liste	n corporation, firm, partnership, limited partressociation, joint venture, or other business as sold 50 percent or more of the outstanding or rmation, see FORM PFSINSTRUCTION GUN about a dependent child's activity, indicate which the child is listed on the Cover Sheet.	corporation, firm, partnership, limited partnership, limited liability partners association, joint venture, or other business association in which you, your sposold 50 percent or more of the outstanding ownership and indicate the categorization, see FORM PFSINSTRUCTION GUIDE. In about a dependent child's activity, indicate the child about whom you which the child is listed on the Cover Sheet. NAME AND ADDRESS Check If Filer's Home Address) Gleck If Filer's Home Address) LESS THAN \$5,000 \$10,000-\$24,999 \$10,000-\$24,990 \$10,000-\$24,990 \$10,000-

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999

☐ \$25,000--OR MORE

10,000--\$24,999

\$10,000--\$24,999

\$10,000--\$24,999

10,000--\$24,999

\$10,000-\$24,999

LIABILITIES OF BUSINESS ASSOCIATIONS

P.O. Box 12070

PART 11B

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

providing the number unde			
¹ BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address)		
² BUSINESS TYPE			
³ HELD, ACQUIRED, OR SOLD BY	☐ FILER	☐ SPOUSE	DEPENDENT CHILD
4 LIABILITIES	DESC	CRIPTION	CATEGORY LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
			LESS THAN \$5,000
			☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
			LESS THAN \$5,000
			☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000OR MORE
			☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
			☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000OR MORE
			☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE

P.O. Box 12070 BOARDS AND EXECUTIVE POSITIONS **PART 12** ■ NOTAPPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Capital Area Metropolitan Planning Organization (CAM PO) **ORGANIZATION** Board Member **POSITION HELD** POSITION HELD BY SPOUSE DEPENDENT CHILD _____ ORGANIZATION POSITION HELD ☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ POSITION HELD BY **ORGANIZATION POSITION HELD** POSITION HELD BY ☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** POSITION HELD BY ☐ FILER SPOUSE ☐ DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** POSITION HELD BY ☐ FILER SPOUSE ☐ DEPENDENT CHILD _____

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

凶	NOTAPPLICABLE
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Texas Ethics Commission

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS			
² AMOUNT				
PROVIDER	NAME AND ADDRESS			
AMOUNT				
PROVIDER	NAME AND ADDRESS			
AMOUNT				
PROVIDER	NAME AND ADDRESS			
AMOUNT				
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

INTEREST IN BUSINESS IN COMMON WITH LOBBYIST

P.O. Box 12070

PART 14

X	NOTAPPLICABLE
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Identify each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional sional association, joint venture, or other business association, other than a publicly-held corporation, in which you, your spouse, or a dependent child, and a person registered as a lobbyist under chapter 305 of the Government Code that both have

an interest. For more information, see FORM PFSINSTRUCTION GUIDE.				
1 BUSINESS ENTITY		NAME A	ND ADDRESS	
² INTEREST HELD BY	☐ FILER	☐ SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME AN	ND ADDRESS	
INTEREST HELD BY	☐ FILER	☐ SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME AN	ND ADDRESS	
INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME AN	ID ADDRESS	
INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
BUSINESS ENTITY		NAME AN	ID ADDRESS	
INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

FEES RECEIVED FOR LOBBYIST OR L				PART 15
Report any fee you received for provi chapter 305 of the Government Code, sates or reimburses a person required services were provided, and indicate INSTRUCTION GUIDE.	or for providing services I to be registered as a lo	to or on behalf of a bbyist. Report the	person you actually name of each person	know directly compen- n or entity for which the
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	S10,000\$24,999	\$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE

REPRESENTATION BY LEGISLATOR BEFORE STATE AGENCY

P.O. Box 12070

PART 16

\mathbf{L}	
Y	NOTAPPLICABLE
Δ	NOTAL LIOADEL

This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS-INSTRUCTION GUIDE.

Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerial acts on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003.

1 STATE AGENCY	_			
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
STATE AGENCY				
PERSON REPRESENTED			,	
FEE CATEGORY	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
STATE AGENCY				
STATE AGENCY PERSON REPRESENTED				
	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	·□ \$25,000OR MORE
PERSON REPRESENTED	☐ LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	·□ \$25,000OR MORE
PERSON REPRESENTED FEE CATEGORY	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	·□ \$25,000OR MORE
PERSON REPRESENTED FEE CATEGORY STATE AGENCY	☐ LESS THAN \$5,000	\$5,000—\$9,999 \$5,000—\$9,999	\$10,000\$24,999 \$10,000\$24,999	

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 17

X	NOTAPPLICABLE

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS—INSTRUCTION GUIDE.

SOURCE OF BENEFIT	NAME AND ADDRESS
·	
2 BENEFIT	
SEREIT!	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
DENEFII	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	· · · · · · · · · · · · · · · · · · ·
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
C	OPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

LEGISLATIVE CONTI	NUANCES		PAR	т 18
NOTAPPLICABLE				
	another law or rule	that requires or perm	under section 30.003 of the Civil Practice nits a court to grant continuances on the legislature.	
1 NAME OF PARTY REPRESENTED				
DATE RETAINED				
3 STYLE, CAUSE NUMBER, COURT & JURISDICTION			-	
DATE OF CONTINUANCE APPLICATION				
WAS CONTINUANCE GRANTED?	☐ YES	□ №		
NAME OF PARTY REPRESENTED				
DATE RETAINED				-
STYLE, CAUSE NUMBER, COURT, & JURISDICTION				
DATE OF CONTINUANCE APPLICATION				
WAS CONTINUANCE GRANTED?	☐ YES	□ №	gang significance and the second of the seco	" `
COPY A	ND ATTACH AD	DDITIONAL PAGES	AS NECESSARY	

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

P.O. Box 12070

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

> I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2008, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said , to certify which, witness my hand and seal of office.

administering oath



(512) 463-5800

PERSON		AUSTIN CITY CL OSTING: DATE C	
	in accordance with chapter 372 of the Government Code.	THE TOTAL NUMBER OF PAC	is FICE O
	uired in 2010, covering calendar year ending December 31, 2009. RM PFS–INSTRUCTION GUIDE when completing this form.	ACCOUNT #	
1 NAME	TITLE; FIRST; MI	OFFICE	USE ONLY
	5. LEE	Date Received	
	NICKNAME; LAST; SUFFIX		
	LEFFINGWELL		
2 ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	301 W. 2 ND ST.		
	AUSTIN, 7x 78701	Receipt #	
	(CHECK IF FILER'S HOME ADDRESS)	HD / PM	Amount
3 TELEPHONE	AREA CODE PHONE NUMBER; EXTENSION	Date Processed	
NUMBER	(512) 974-2250	Date Imaged	_
4 REASON FOR FILING	CANDIDATE		(INDICATE OFFICE)
STATEMENT	BELECTED OFFICER MAYOK		
	1_		(INDICATE OFFICE)
	APPOINTED OFFICER		(INDICATE AGENCY)
	EXECUTIVE HEAD	•	(INDICATE AGENCY)
	FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT		
	STATE PARTY CHAIR		(INDICATE PARTY)
	OTHER		(INDICATE POSITION)
Family members w dependent children	hose financial activity you are reporting (filer must report information about t if the filer had actual control over that activity):	he financial activity of	the filer's spouse or
SPOUSE	JULIE A. BYERS		
DEPENDENT C	·		
	2	_	
	3		
In Parts 1 through 1 required to disclose over that person's fi	•	ependent child if you	rough 14, you are had actual control
	COPY AND ATTACH ADDITIONAL PAGES AS	NECESSARY	

P.O. Box 12070

SOURCES OF OCCU	PATIONAL	INCOME	PART 1A
NOT APPLICABLE			
When reporting information about providing the number under which			child about whom you are reporting by
1 INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD
² EMPLOYMENT			OF EMPLOYER / POSITION HELD Filer's Home Address)
EMPLOYED BYANOTHER		OF AUSTIN W. 2ND ST IN, TK 7870	
SELF-EMPLOYED			MAY DK.
INFORMATION RELATES TO	FILER	Z SPOUSE	DEPENDENT CHILD
EMPLOYMENT			OF EMPLOYER / POSITION HELD
EMPLOYED BY ANOTHER	1113	NW HUSPI RESEARCH B IN, TX 7875 REG. NURS	GLVP.
SELF-EMPLOYED			OF OCCUPATION
INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD
EMPLOYMENT			OF EMPLOYER / POSITION HELD iler's Home Address)
EMPLOYED BY ANOTHER			
SELF-EMPLOYED	·	NATURE	OF OCCUPATION
COPY A	ND ATTACH A	DDITIONAL PAGES	AS NECESSARY

Texas Ethics Commission

RETAINERS	PART 1B
NOT APPLICABLE	
your spouse, or a dependent child services on a matter specified at the work actually performed durin see FORM PFS-INSTRUCTION	
	ut a dependent child's activity ,indicate the child about whom you are reporting by the child is listed on the Cover Sheet.
FEE RECEIVED FROM	NAME AND ADDRESS
2	NAME OF BUSINESS
FEE RECEIVED BY	FILER OR FILER'S BUSINESS
	SPOUSE OR SPOUSE'S BUSINESS
	DEPENDENT CHILD OR CHILD'S BUSINESS
FEE AMOUNT	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
FEE RECEIVED FROM	NAME AND ADDRESS
FEE RECEIVED BY	NAME OF BUSINESS
	FILER OR FILER'S BUSINESS
	SPOUSE OR SPOUSE'S BUSINESS
	DEPENDENT CHILD OR CHILD'S BUSINESS
FEE AMOUNT	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
COPY /	AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commiss	ion P.O. B	ox 12070 Austir	n, Texas 78711-207	70 (512) 463-	-5800 1-800-325-8500
STOCK					PART 2
NOT APPLICA	ABLE				
and indicate the cat	egory of the num ount of the net ga		acquired.lf some o	r all of the stock was	during the calendar yeas sold, also indicate the n, see FORM PFS
		dependent child's active child is listed on the	•	child about whom y	ou are reporting by
¹ BUSINESS ENTIT	Υ	GOVERAL	ELECTRIC	AME	
² STOCK HELD OR	ACQUIRED BY	FILER	OUSE	DEPENDENT CHI	LD
³ NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	7,000 TO 4,999
4 IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	Y .	AMERICA	N EXPRE	AME SS	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	RES	LESS THAN 100	10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTITY	<u> </u>	APPLIED	MATERIAL	ME .S	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHAI	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 E	4,000 TO 4,999
IF SOLD	NET GAIN		\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTITY	(ADP	NA	ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHAI	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	2 500 TO 999	1,000 TO 4,999
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTITY	<u> </u>	601	NA	ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHAI	RES	LESS THAN 100 5,000 TO 9,999	100 TO 499 10,000 OR MORI	2 500 TO 999	1,000 TO 4,999
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000OR MORE

STOCK				•	PART 2
□ NOT APPLIC	CABLE				
and indicate the car	tegory of the number ount of the net ga		acquired.If some or	all of the stock was	during the calendar yea s sold, also indicate the n, see FORM PFS
		dependent child's active child is listed on the		child about whom yo	ou are reporting by
¹ BUSINESS ENTIT	Υ	CALMA		AME	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D
3 NUMBER OF SHA	ARES	LESS THAN 100	100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 E	1,000 TO 4,999
4 IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Υ	CINTAS	N/	AME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	.D
NUMBER OF SHA	RES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
<u> </u>	<u>~</u>	☐ 5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Υ	COCA CO	NA	ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	500 TO 999	☐ 1,000 TO 4,999
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Υ	COLGATE.	-PALMOLIV	ME Æ	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHA	RES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Y	Comcast	- NA	ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	500 TO 999	1,000 TO 4,999
IF SOLD	NET GAIN	5,000 TO 9,999	\$5,000~\$9,999	\$10,000\$24,999	\$25,000OR MORE
		AND ATTACH ADDITIO			

STOCK					PART 2
☐ NOT APPLIC	CABLE				
and indicate the ca	tegory of the num ount of the net ga		cquired.If some or	all of the stock was	during the calendar year sold, also indicate the n, see FORM PFS
		dependent child's active child is listed on the		child about whom yo	ou are reporting by
¹ BUSINESS ENTIT	ſΥ	DELL	NA	ME	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 E	7,000 TO 4,999
4 IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Υ	DISNEY	NA NA	AME	
STOCK HELD OR	ACQUIRED BY	H ILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	1 500 TO 999	1,000 TO 4,999
			10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE
BUSINESS ENTITY		DUPONT	N.A	ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D D
NUMBER OF SHA	ARES	LESS THAN 100	10,000 OR MOR	□ 500 TO 999 Е	☐ 1,000 TO 4,999
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Υ	ETHAN A	·USN	ME	
STOCK HELD OR	ACQUIRED BY	12 FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	ARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Υ	FEDEX	NA	ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
	COP	V AND ATTACH ADDITIO	NAI PAGES AS NEC	PERCADY	

STOCK					PART 2
NOT APPLIC	ABLE				
and indicate the cat	egory of the number		cquired.lf some or	all of the stock was	during the calendar year sold, also indicate the n, see FORM PFS
		dependent child's active child is listed on the		child about whom yo	ou are reporting by
¹ BUSINESS ENTIT	Υ	FRONTH	FR OIL	AME	
² STOCK HELD OR	ACQUIRED BY	≇ FILÉR	SPOUSE	DEPENDENT CHIL	.D
3 NUMBER OF SHA	RES	LESS THAN 100	☐ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD	NET GAIN	5,000 TO 9,999	\$5,000\$9,999	\$10,000-\$24,999	\$25,000~OR MORE
BUSINESS ENTIT	Y	GANNET	7	ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	2 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	Y	GENERAL	MILLS	ME	· · · · · · · · · · · · · · · · · · ·
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA		TILEGE THAN 400	100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
NOMBER OF SHA	RES	LESS THAN 100	10,000 OR MOR	E	
IF SOLD	RES NET GAIN NET LOSS		<u>-</u>		\$25,000OR MORE
IF SOLD	NET GAIN NET LOSS	5,000 TO 9,999	10,000 OR MOR \$5,000\$9,999		\$25,000OR MORE
IF SOLD	NET GAIN NET LOSS	5,000 TO 9,999	10,000 OR MOR \$5,000\$9,999	\$10,000-\$24,999	
IF SOLD BUSINESS ENTIT	NET GAIN NET LOSS Y ACQUIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ☐ HUTCHINS	10,000 OR MOR \$5,000-\$9,999	\$10,000\$24,999	
IF SOLD BUSINESS ENTIT STOCK HELD OR	NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN \$5,000 HUTCHINS	10,000 OR MOR \$5,000-\$9,999 ON TECH SPOUSE	\$10,000-\$24,999 ME DEPENDENT CHIL 500 TO 999	.D
IF SOLD BUSINESS ENTIT STOCK HELD OR	NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN \$5,000 HUTCHINS TILER LESS THAN 100	10,000 OR MOR \$5,000-\$9,999 ON TECH SPOUSE 100 TO 499	\$10,000-\$24,999 ME DEPENDENT CHIL 500 TO 999	.D
BUSINESS ENTITE STOCK HELD OR NUMBER OF SHA	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS	5,000 TO 9,999	10,000 OR MOR \$5,000\$9,999 ON TECH SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	#E \$10,000\$24,999 ME DEPENDENT CHIL 1 500 TO 999 E	_D
BUSINESS ENTITE STOCK HELD OR NUMBER OF SHA	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y	5,000 TO 9,999	10,000 OR MOR \$5,000\$9,999 ON TECH SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	#E \$10,000-\$24,999 ME DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	.D 12 1,000 TO 4,999 \$25,000OR MORE
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BUSINESS ENTITE STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITE STOCK HELD OR	NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN \$5,000 HUTCHINS FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	10,000 OR MOR \$5,000\$9,999 SPOUSE \$5,000\$9,999 NA	### \$10,000\$24,999 #################################	.D [Z /1,000 TO 4,999 \$25,000OR MORE

1-800-325-8506

STOCK					PART 2
☐ NOT APPLIC	ABLE			_	
and indicate the cat	egory of the numb ount of the net ga		acquired.If some or	r all of the stock was	during the calendar yea sold, also indicate the n, see FORM PFS
		dependent child's active child is listed on the		child about whom yo	ou are reporting by
¹ BUSINESS ENTIT	Υ	MOCH	ULDINGS"	AME	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	
³ NUMBER OF SHA	RES	LESS THAN 100	□ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	Y	MONC EL	GCTLONICS"	MATERIALS	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Y	MARSH +	- MELENN	AME AN	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	4,000 TO 4,999
		5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Y	MASCO	N/	ME .	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	RES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	7,000 TO 4,999
		5,000 TO 9,999	10,000 OR MOR	E	
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
BUSINESS ENTIT	Y	MAXWELL		ME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	RES	LESS THAN 100	100 TO 499	☐ 500 TO 999	1,000 TO 4,999
IF SOLD	NET GAIN NET LOSS	5,000 TO 9,999	10,000 OR MOR \$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
	COPY	AND ATTACH ADDITIO	NAL DAGES AS NE	PECCADY	

STOCK					PART 2
☐ NOT APPLI	CABLE				
and indicate the ca	itegory of the number abount of the net ga		acquired.If some or	r all of the stock was	during the calendar yea s sold, also indicate the n, see FORM PFS
		dependent child's active child is listed on the		child about whom ye	ou are reporting by
¹ BUSINESS ENTI	ΓY	MICROSO	FT	AME	
² STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	D
3 NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	7,000 TO 4,999
4 IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTI	ΓΥ	110100		AME	
STOCK HELD OR	ACQUIRED BY	NEW POR	/ SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA		LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	7,000 TO 4,999
		□ 5,000 TO 9,999	☐ 10,000 OR MOR	_	
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE
BUSINESS ENTIT		NEWS C	ikP "	AME	
BUSINESS ENTIT	TY	NEWS C	NY SPOUSE	AME DEPENDENT CHIL	
	Y ACQUIRED BY		IKP	DEPENDENT CHII	_D ☑1,000 TO 4,999
STOCK HELD OR	Y ACQUIRED BY	LESS THAN 100	□ SPOUSE □ 100 TO 499	DEPENDENT CHII	
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHIL	1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA	ACQUIRED BY ARES NET GAIN NET LOSS	LESS THAN 100 5,000 TO 9,999	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHII 500 TO 999 RE \$10,000\$24,999	1 ,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 PAYCHEX LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999 N/ SPOUSE 700 TO 499	DEPENDENT CHILD 500 TO 999 EE \$10,000\$24,999 AME DEPENDENT CHILD 500 TO 999	1 ,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR	ACQUIRED BY ARES NET GAIN NET LOSS TY ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 PAYCHEK	SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHILD 500 TO 999 EE \$10,000\$24,999 AME DEPENDENT CHILD 500 TO 999	□ \$25,000OR MORE
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STOCK					PART 2
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¹ BUSINESS ENTIT	Υ	SECTORS	POR FINA	ME NCIBL	
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Texas Ethics Commission P.O. B	ox 12070 Austir	n, Texas 78711-207	70 (512) 463-	5800 1-800-325-8500
STOCK				PART 2
☐ NOT APPLICABLE				
List each business entity in which you and indicate the category of the number category of the amount of the net go INSTRUCTION GUIDE.	ber of shares held or a	acquired.If some or	r all of the stock was	
When reporting information about a providing the number under which the			child about whom yo	ou are reporting by
¹ BUSINESS ENTITY	WALMA	RT N	AME	
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COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

FILER

LESS THAN 100

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4 100 TO 499

☐ 10,000 OR MORE

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\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

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BUSINESS ENTITY

NUMBER OF SHARES

IF SOLD

STOCK HELD OR ACQUIRED BY

NET GAIN

NET LOSS

Revised 10/01/2009

1,000 TO 4,999



STOCK					PART 2
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STOCK					PART 2
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¹ BUSINESS ENTIT	Υ	E THAN	ALLON	AME	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	_D
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STOCK					PART 2
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STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 \$10,000\$24,999 ME DEPENDENT CHIL 500 TO 999 E	1,000 TO 4,999 \$25,000OR MORE D 1,000 TO 4,999
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA IF SOLD	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET GAIN NET LOSS Y	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 \$10,000\$24,999 DEPENDENT CHIL 500 TO 999 E \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000~OR MORE ☐ 1,000 TO 4,999 ☐ 1,000 TO 4,999 ☐ \$25,000~OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999 NA SPOUSE 100 TO 499 10,000 OR MOR \$5,000-\$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000\$24,999 ME ☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000\$24,999	☐ 1,000 TO 4,999 ☐ \$25,000~OR MORE ☐ 1,000 TO 4,999 ☐ 1,000 TO 4,999 ☐ \$25,000~OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY STOCK HELD OR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 NA ☐ SPOUSE ☐ 10,000 OR MOR ☐ \$5,000\$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000\$24,999 ME ☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000\$24,999 ME ☐ DEPENDENT CHIL ☐ 500 TO 999	1,000 TO 4,999 \$25,000OR MORE D 1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITY STOCK HELD OR	ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY RES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999 NA □ SPOUSE □ 10,000 OR MOR □ \$5,000\$9,999 NA □ SPOUSE □ 100 TO 499 □ 10,000 OR MOR	☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000\$24,999 ME ☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000\$24,999 ME ☐ DEPENDENT CHIL ☐ 500 TO 999	1,000 TO 4,999 \$25,000OR MORE D 1,000 TO 4,999 \$25,000OR MORE D \$1,000 TO 4,999

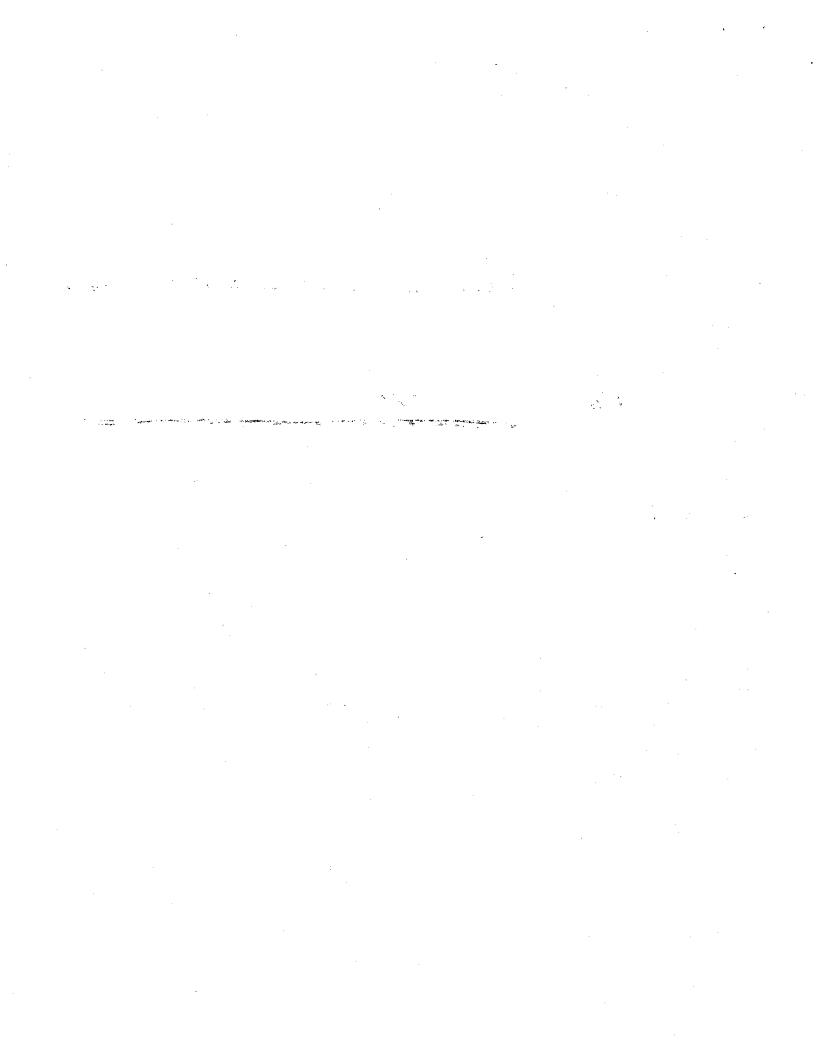
ALCONOL CONT.

Texas Ethics Commission

BONDS, NOTES & O	THER COMMERCIAL PAPER PART 3
☐ NOT APPLICABLE	
calendar year. If sold, indicate the information, see FORM PFSINST	ommercial paper held or acquired by you, your spouse, or a dependent child during the e category of the amount of the net gain or loss realized from the sale. For more RUCTION GUIDE. It a dependent child's activity , indicate the child about whom you are reporting by
	the child is listed on the Cover Sheet.
1 DESCRIPTION OF INSTRUMENT	TROASURY NOTES (MANAGEO IRA ACC FIRELTY
² HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
3 IF SOLD	
☐ NET GAIN	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	CASH RESCRUESS (MANGGED IRA ACCT FIDELITY
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	CORP BONDS (MANAGED IRA ACCT FIDELITY)
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FU	JNDS				PART 4
☐ NOT APPLIC	CABLE				
acquired during the some or all of the si	e calendar year an hares of a mutual	d indicate the categor	y of the number on dicate the category	f shares of mutual fury of the amount of the	dependent child held or unds held or acquired of ne net gain or loss realize
		dependent child's active child is listed on the		child about whom y	ou are reporting by
1 MUTUAL FUND		HARTFORD	MUTUAL	AME FUNDS MIDE	CAP
² SHARES OF MUTU HELD OR ACQUIRE		FiLER	S POUSE	DEPENDENT CHI	LD
3 NUMBER OF SHAF OF MUTUAL FUND		LESS THAN 100 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	500 TO 999	1,000 TO 4,999
4 IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
MUTUAL FUND			NA	èME	
SHARES OF MUTU HELD OR ACQUIRE		FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHAR OF MUTUAL FUND	RES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	□ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
MUTUAL FUND			NA	ME	
SHARES OF MUTU HELD OR ACQUIRE	· - · - · · -	FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHAR OF MUTUAL FUND		LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
	COPY	AND ATTACH ADDITIO	NAL PAGES AS NE	CESSARY	

BONDS, NOTES & O	THER COMMERCIAL PAPER	PART 3
NOTAPPLICABLE		
calendar year. If sold, indicate th information, see FORM PFS-INSTI		For more
	It a dependent child's activity, indicate the child about whom you are re the child is listed on the Cover Sheet.	porting by
DESCRIPTION OF INSTRUMENT	PERSONAL LOAN TO LOT LEFFINGUEU (:AmaqıcN
² HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD	
3 IF SOLD WA	N/A	
□ NET GAIN	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E
☐ NET LOSS		
DESCRIPTION OF INSTRUMENT		
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD	_
IF SOLD		
☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000-	-OR MORE
☐ NET LOSS		
DESCRIPTION OF INSTRUMENT		
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD	_
IF SOLD		
☐ NET GAIN →	LESS THAN \$5,000 S5,000\$9,999 \$10,000\$24,999 \$25,000-	-OR MORE
☐ NET LOSS		
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY	



INCOME FROM IN I	ERESI, DIVIDENDS, ROYALIJES & REN IS PART 5
☐ NOT APPLICABLE	
interest, dividends, royalties, and more information, see FORM PFS When reporting information about	your spouse, or a dependent child received in excess of \$500 that was derived from I rents during the calendar year and indicate the category of the amount of the incomeor S-INSTRUCTION GUIDE. ut a dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet.
1 SOURCE OF INCOME	NAME AND ADDRESS VELOCITY C.U. 505 BARTON SPGS RP AUSTIN, TX 78704
² RECEIVED BY	FILER SPOUSE DEPENDENT CHILD
AMOUNT	\$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE
SOURCE OF INCOME	VELOCITY C.U. NAME AND ADDRESS (ABOVE)
RECEIVED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD
AMOUNT	\$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE
SOURCE OF INCOME	FIDELITY INVESTMENT ACCTS
RECEIVED BY	FILER SPOUSE DEPENDENT CHILD
AMOUNT	\$5,000\$4,999 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
COPY	AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6



Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability or more information, see FORM PFS-INSTRUCTION GUIDE.

when reporting information about a dependent child's activity , indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.					
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT					
² LIABILITY OF	FILER	SPOUSE DEPENDENT CHILD			
3 GUARANTOR					
4 AMOUNT	\$1,000\$4,999	\$5,000-\$9,999 \$10,000-\$24,999 \$25,000OR MORE			
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT					
LIABILITY OF	FILER	SPOUSE DEPENDENT CHILD			
GUARANTOR					
AMOUNT	\$1,000\$4,999	\$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE			
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT		**			
LIABILITY OF	FILER	SPOUSE DEPENDENT CHILD			
GUARANTOR					
AMOUNT	\$1,000\$4,999	\$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

INTERESTS IN REAL	PROPERTY PART 7A
☐ NOT APPLICABLE	
calendar year. If the interest was s	real property held or acquired by you, your spouse, or a dependent child during the old, also indicate the category of the amount of the net gain or loss realized from the neterest" and other specific directions for completing this section, see FORM PFS—
	a dependent child's activity , indicate the child about whom you are reporting by the child is listed on the Cover Sheet.
1 HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 4516 BALCONES DR., AUSTIN, TX 78731 (TRAVIS CUUNTY)
DESCRIPTION LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
A NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	
F SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 439 N. 8 LA 57. LOUP CITY, NE 68853 (SHOEMAN CXUNTY)
DESCRIPTION LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

囟	NOT	APPL	ICA	BLE
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Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the section are explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity , indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

providing the number under which	the child is listed on the Cover Sneet.				
1 HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD				
DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address)				
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE				
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD				
DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address)				
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 S5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE				
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD				
DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address)				
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE				
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

P.O. Box 12070

TRUST INCOME				PART 9
☐ NOT APPLICABLE				
Identify each source of income rec category of the amount of income than \$500 in income, if the identity When reporting information about	received.Also identify e of the asset is knownF	each asset of the tru or more information	ust from which the be n,see FORM PFSIN	eneficiary receive <i>thore</i> NSTRUCTION GUIDE
providing the number under which				
1 SOURCE	DELTA P	ILOTS RETI	of trust Rement Tru	457
² BENEFICIARY	Filer	SPOUSE	DEPENDENT (CHILD
3 INCOME	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED				
UNKNOWN				
SOURCE	DEPARTMEN	M of DSG	OF TRUST NSE MILITAR	LY RET,
BENEFICIARY	FILER	SPOUSE	☐ DEPENDENT (CHILD
INCOME	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED UNKNOWN				
SOURCE	SOCIAL :	NAME OF	OF TRUST	
BENEFICIARY	FILER	SPOUSE	DEPENDENT C	CHILD
INCOME	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED				
UNKNOWN			W	
COPY A	ND ATTACH ADDITION	ONAL PAGES AS	NECESSARY	

Texas Ethics Commission

BLIND TRUSTS			PART 10A	
NOT APPLICABLE				
Identify each blind trust that complies with section 572.023(c) of the Government Codesee FORM PFS-INSTRUCTION GUIDE.				
When reporting information about a dependent child's activity , indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.				
1 NAME OF TRUST				
² TRUSTEE		NAME AF	ND ADDRESS	
³ BENEFICIARY	FILER	SPOUSE	DEPENDENT CHILD	
4 FAIR MARKETVALUE	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999 \$25,000-OR MORE	
5 DATE CREATED				
NAME OF TRUST				
TRUSTEE		NAME AF	ND ADDRESS	
BENEFICIARY	FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999 \$25,000OR MORE	
DATE CREATED				
NAME OF TRUST				
TRUSTEE		NAME AN	D ADDRESS	
BENEFICIARY	FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999 \$25,000OR MORE	
DATE CREATED				
COPY A	ND ATTACH ADDITIO	NAL PAGES AS	NECESSARY	

Austin, Texas 78711-2070

TRUSTEE STATEMENT

PART 10B

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Texas Ethics Commission

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10AThe portions of section 572.023 of the Government Code that relate to blind trusts are listed below

1	NAME OF TRUST	
2	TRUSTEE NAME	
3	FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
4	TRUSTEE STATEMENT	I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.

§ 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
 - (8) identification of the source and the category of the amount of all income received as beneficiary of a trusther than a blind trust that complies with Subsection (c)and identification of each trust asset, if known to the beneficiary from which income was received by the beneficiary in excess of \$500;
 - (14) identification of each blind trust that complies with Subsection (c), including:
 - (A) the category of the fair market value of the trust;
 - (B) the date the trust was created;
 - (C) the name and address of the trustee; and
 - (D) a statement signed by the trustee, under penalty of perjury stating that:
 - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and

Trustee Signature

- (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
 - (1) the trustee:
 - (A) is a disinterested party;
 - (B) is not the individual;
 - (C) is not required to register as a lobbyist undechapter 305;
 - (D) is not a public officer or public employee; and
 - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
 - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchaptene individual must fle an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

	Z	NO	TA	PPL	ICA	ΒL	E
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Texas Ethics Commission

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information see FORM PFS--INSTRUCTION GUIDE

Austin, Texas 78711-2070

When reporting information about a dependent child's activity , indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address)			
² BUSINESS TYPE				
³ HELD, ACQUIRED, OR SOLD BY	FILER	SPOUSE	DEPENDENT CHILD —	_
4 ASSETS	DE	SCRIPTION	CATEGORY LESS THAN \$5,000 \$5,000\$ \$10,000\$24,999 \$25,000	
			LESS THAN \$5,000 \$5,000\$ \$10,000\$24,999 \$25,000\$ LESS THAN \$5,000 \$5,000\$	OR MORE 9,999
			\$10,000-\$24,999 \$25,000-6 LESS THAN \$5,000 \$5,000-\$6 \$10,000-\$24,999 \$25,000-6	9,999
·	• • • • • • • • • • • • • • • • • • • •		LESS THAN \$5,000 \$5,000\$9	
			□ LESS THAN \$5,000 □ \$5,000\$9 □ \$10,000\$24,999 □ \$25,0000	
		 	LESS THAN \$5,000 \$5,000\$9	
		ADDITIONAL PAGES	LESS THAN \$5,000 \$5,000\$9	

LESS THAN \$5,000 \$5,000--\$9,999

\$25,000--OR MORE

\$10,000--\$24,999

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 LIABILITIES OF BUSINESS ASSOCIATIONS PART 11B NOT APPLICABLE Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity , indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS **BUSINESS** (Check If Filer's Home Address) **ASSOCIATION** ² BUSINESS TYPE 3 HELD, ACQUIRED, FILER SPOUSE DEPENDENT CHILD — OR SOLD BY DESCRIPTION CATEGORY LIABILITIES \$5,000--\$9,999 LESS THAN \$5,000 \$10.000--\$24.999 \$25,000--OR MORE

		· · · · · · · · · · · · · · · · · · ·
		LESS THAN \$5,000 \$5,000-\$9,999
		\$10,000\$24,999 \$25,000OR MORE
	,	LESS THAN \$5,000 \$5,000-\$9,999
		\$10,000\$24,999 \$25,000OR MORE
		LESS THAN \$5,000 \$5,000\$9,999
		\$10,000\$24,999 \$25,000OR MORE
		LESS THAN \$5,000 \$5,000\$9,999
		\$10,000-\$24,999 \$25,000-OR MORE
		LESS THAN \$5,000 \$5,000-\$9,999
		\$10,000\$24,999 \$25,000OR MORE
		LESS THAN \$5,000 \$5,000\$9,999
		\$10,000\$24,999 \$25,000OR MORE
C	COPY AND ATTACH ADDITIONAL PAGES	AS NECESSARY

Austin, Texas 78711-2070

BOARDS AND EXECUTIVE POSITIONS PART 12 ☐ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you. your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position heldFor more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity , indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. CAPITAL AREA METROPOLITAN PLANNING DRG. **ORGANIZATION** ² POSITION HELD BOARD MOMBER ³ POSITION HELD BY FILER SPOUSE DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** ☐ FILER POSITION HELD BY SPOUSE DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** POSITION HELD BY FILER SPOUSE DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** POSITION HELD BY ☐ FILER SPOUSE DEPENDENT CHILD _____ **ORGANIZATION POSITION HELD** POSITION HELD BY ☐ FILER SPOUSE DEPENDENT CHILD _____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

NOT A	PPLIC	ABLE
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Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS
	·
_	
² AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
7.4,100.01	
	NAME AND ADDRESS
PROVIDER	
AMOUNT	
PROVIDER	NAME AND ADDRESS
PROVIDER	
AMOUNT	
COPY AI	ND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission

INTEREST IN BUSIN	ESS IN COM	IMON WITH L	OBBYIST PART 14		
NOT APPLICABLE			•		
sional association, joint venture, or	r other business asse a person registered a	ociation, other than a is a lobbyist under cha	y partnership, professional corporation, pfes- publicly-held corporation, in which you, your pter 305 of the Government Code that both ha		
¹ BUSINESS ENTITY		NAME .	AND ADDRESS		
·					
² INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME /	AND ADDRESS		
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME /	AND ADDRESS		
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME A	ND ADDRESS		
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME A	ND ADDRESS		
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
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Austin, Texas 78711-2070

FEES RECEIVED FOR SERVICES RENDERED

PART 15

TO A LOBBYIST OR LOBBYIST'S EMPLOYER NOT APPLICABLE						
Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyistReport the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFSINSTRUCTION GUIDE.						
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED						
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED						
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED						
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED						
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED						
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED						
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY						

REPRESENTATION BY LEGISLATOR BEFORE STATE AGENCY

NOT APPLICABLE

This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS-INSTRUCTION GUIDE.

Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerialtac on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003.

1 STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE			
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE			
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE			
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000 \$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

1-800-325-8506

BENEFITS DERIVED FROM FUNCTIONS HONORING **PUBLIC SERVANT**

P.O. Box 12070

PART 17

7X	NOT	APPLI	ICABL	E
ω			-,	_

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapte 25 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties of activities in connection with the office which are nonreimbursable by the state or a political subdivision such a benefitis received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable hereor more information, see FORM PFS--INSTRUCTION GUIDE.

	_			
SOURCE OF BENEFIT		NAME AND ADDRESS		
	·			
² BENEFIT				
				
SOURCE OF BENEFIT		NAME AND ADDRESS		
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SOURCE OF BENEFIT		NAME AND ADDRESS		
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SOURCE OF BENEFIT		NAME AND ADDRESS		
BENEFIT				
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

(512) 463-5800

P.O. Box 12070

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

P.O. Box 12070

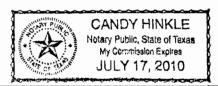
The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

> I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2009, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

CANDY HINKLE Motery Public, State of Texas My Commission Expires JULY 17, 2010

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Lee Hingwei to certify which, witness my hand and seal of office.



PERSONAL FINANCIAL STATEMENT		FORM PFS				
		RECE				
For filings requ	n accordance with chapter 572 of the Government Code. uired in 2010, covering calendar year ending December 31, 2009. RM PFSINSTRUCTION GUIDE when completing this form.	TOTAL NUMBER OF PAGE 2011 APR 27 ACCOUNT #				
1 NAME	TITLE; FIRST; MI	OFFICE	USE ONLY			
	S. LEE	Date Received				
	LEFFINGWELL]				
² ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE					
	301 W. 2ND ST.					
	AUSTIN, TX 78701	Receipt #				
	(CHECK IF FILER'S HOME ADDRESS)	HD / PM	Amount			
3 TELEPHONE	AREA CODE PHONE NUMBER; EXTENSION	Date Processed				
NUMBER	(512) 974-2250	Date Imaged				
4 REASON FOR FILING STATEMENT	□ CANDIDATE □ ELECTED OFFICER		(INDICATE OFFICE) (INDICATE AGENCY) (INDICATE AGENCY) (INDICATE PARTY) (INDICATE POSITION)			
	dependent children if the filer had actual control over that activity):					
DEPENDENT C	HILD 1,					
	2					
	3					
required to disclose	In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.					
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY						

SOURCES OF OCCU	PATIONAL	INCOME	PART 1A
NOTAPPLICABLE			
When reporting information about providing the number under which			he child about whom you are reporting by
1 INFORMATION RELATES TO	[X] FILER	SPOUSE	DEPENDENT CHILD
² EMPLOYMENT			FEMPLOYER/POSITION HELD Filer's Home Address)
EMPLOYED BY ANOTHER	361	1 OF AUSTIN W. 2 MD ST. STIN, TX 78701	
SELF-EMPLOYED		MAYDE	DF OCCUPATION
INFORMATION RELATES TO	☐ FILER		DEPENDENT CHILD
EMPLOYMENT			FEMPLOYER/POSITION HELD Filer's Home Address)
EMPLOYED BY ANOTHER) /	TON HUSPITAL 13 RESEARCH ISTIN, TX 7871	BWD,
SELF-EMPLOYED	K	NATURE	OF OCCUPATION
INFORMATION RELATES TO	☐ FILER	☐ SPOUSE	DEPENDENT CHILD
EMPLOYMENT			FEMPLOYER / POSITION HELD fler's Home Address)
☐ EMPLOYED BY ANOTHER			
SELF-EMPLOYED		NATURE (DF OCCUPATION
COPY A	ND ATTACH A	DDITIONAL PAGES A	AS NECESSARY

STOCK					PART 2	
NOTAPPLIC	CABLE					
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE.						
		dependent child's ac child is listed on the Co		child about whom	you are reporting by	
¹ BUSINESS ENTIT	ſY	FIDELTY IR		ASCT BY CENT	rury memt,	
² STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL		
3 NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	☐ 1,000 TO 4,999	
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	A SANDE OK MORE	
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			P MATERIA			
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		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000OR MORE	
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	☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE	
BUSINESS ENTIT	NET LOSS	LESS THAN \$5,000	□ \$5,000\$9,999 D I CORP		□ \$25,000OR MORE	
	NET LOSS	LESS THAN \$5,000	\$5,000\$9,999			
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STOCK HELD OR NUMBER OF SHA	NET LOSS Y ACQUIRED BY	LESS THAN \$5,000	□ \$5,000-\$9,999 □ CORP □ SPOUSE	DEPENDENT CHIL	.D	
BUSINESS ENTIT	NET LOSS Y ACQUIRED BY	LESS THAN \$5,000	□ \$5,000\$9,999 □ CORP □ SPOUSE □ 100 TO 499	DEPENDENT CHIL	_D 1,000 TO 4,999	
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RETAINERS PART 1B NOTAPPLICABLE This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS FEE RECEIVED FROM NAME OF BUSINESS FEE RECEIVED BY ☐ FILER OR FILER'S BUSINESS __ SPOUSE OR SPOUSE'S BUSINESS -☐ DEPENDENT CHILD OR CHILD'S BUSINESS **FEE AMOUNT** ☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE NAME AND ADDRESS FEE RECEIVED FROM NAME OF BUSINESS **FEE RECEIVED BY** FILER OR FILER'S BUSINESS ___ OR SPOUSE'S BUSINESS _____ ☐ DEPENDENT CHILD OR CHILD'S BUSINESS **FEE AMOUNT** LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK			•		PART 2
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and indicate the ca	tegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTIT	ΓY	DELTA	AIRLINES	AME	
² STOCK HELD OR	R ACQUIRED BY	₩ FILER	SPOUSE	DEPENDENT CHIL	
3 NUMBER OF SHA	ARES	☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000—\$9,999	\$10,000 -\$24 ,999	☐ \$25,000-OR MORE
BUSINESS ENTI	ΤΥ	GENER		ame RIC	
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STOCK					PART 2
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		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	ΓΥ	New	PORT	AME	
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³ NUMBER OF SHA	ARES	LESS THAN 100	100 TO 499 10,000 OR MOF	☐ 500 TO 999 RE	1,000 TO 4,999
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STOCK					PART 2
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and indicate the ca	tegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	ΓΥ	55461		ME 8L064 Comm	`
² STOCK HELD OF	RACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	D
3 NUMBER OF SHA	ARES	LESS THAN 100	☐ 10,000 OR MOR	□ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN X NET LOSS	X LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
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IF SOLD	☐ NET GAIN	☑ LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTI	ΤΥ	Cymi	ER INC	AME	
STOCK HELD OF	ACQUIRED BY	□ FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	ARES	LESS THAN 100	☑ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	NET GAIN	₩ LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
BUSINESS ENTI	ſΥ	1 MATION	I CORP "	AME	
STOCK HELD OF	ACQUIRED BY	K FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHA	ARES	LESS THAN 100	X 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
BUSINESS ENTIT	ГҮ	KIMBERY		AME	
STOCK HELD OR	ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHA	ARES	LESS THAN 100		☐ 500 TO 999	1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000~OR MORE
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and indicate the ca	itegory of the numb mount of the net	er of shares held or ac	equired. If some or	r all of the stock was	uring the calendar year sold, also indicate the on, see FORM PFS
		dependent child's ac child is listed on the C		child about whom	you are reporting by
¹ BUSINESS ENTI	ΤΥ	LEGGETT	+ PRATT	AME	
² STOCK HELD OF	R ACQUIRED BY	[X FILER	SPOUSE	DEPENDENT CHI	LD
³ NUMBER OF SH	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☑ 100 TO 499 ☐ 10,000 OR MOF	☐ 500 TO 999 RE	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000 —\$24 ,999	☐ \$25,000-OR MORE
BUSINESS ENTI	ΤΥ	TALBOTT		AME	
STOCK HELD OF	R ACQUIRED BY	[X] FILER	SPOUSE	☐ DEPENDENT CHI	LD
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		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	☐ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
BUSINESS ENTIT	ΓΥ	FIDELM		AME MONEY MARK	€ 7
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STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
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NUMBER OF SHA				☐ 500 TO 999	
		LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	
NUMBER OF SHA	ARES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	500 TO 999	☐ 1,000 TO 4,999
NUMBER OF SHA	NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	500 TO 999	☐ 1,000 TO 4,999
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BUSINESS ENTITE STOCK HELD OF NUMBER OF SHA	ARES NET GAIN NET LOSS RACQUIRED BY ARES NET GAIN NET LOSS TY RACQUIRED BY ARES NET GAIN NET GAIN NET LOSS	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 ☐ 100 TO 499 ☐ 10,000 OR MOR ☐ \$5,000\$9,999 ☐ 10,000 OR MOR ☐ 10,000 OR MOR ☐ 10,000 OR MOR ☐ \$5,000\$9,999 ☐ 10,000 OR MOR ☐ \$5,000\$9,999	500 TO 999 500 TO 999	☐ 1,000 TO 4,999 LD

STOCK					PART 2
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and indicate the ca	tegory of the numb mount of the net	, your spouse, or a dep er of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTIT	ΓΥ	1NTE	L	ME	
² STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
³ NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999		☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTI	ſΥ	NEWF	PORT CORP"	AME	,
STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	ARES	LESS THAN 100	☒ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	Υ	UNITE	D HEALTHER	ame LOUP	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	D
NUMBER OF SHA	ARES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
		5,000 10 9,999	10,000 OK MON		
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
IF SOLD BUSINESS ENTIT	☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	WE	\$25,000OR MORE
	NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	WE	
BUSINESS ENTIT	NET LOSS Y ACQUIRED BY	LESS THAN \$5,000	□ \$5,000\$9,999 MART STOLE	ME 55	
BUSINESS ENTIT	NET LOSS Y ACQUIRED BY	□ LESS THAN \$5,000 WAL □ FILER	□ \$5,000-\$9,999 MART STOLE	DEPENDENT CHIL	.D
BUSINESS ENTIT	NET LOSS Y ACQUIRED BY	LESS THAN \$5,000	□ \$5,000\$9,999 MART STOLE SPOUSE 100 TO 499	DEPENDENT CHIL	.D
BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	NET LOSS ACQUIRED BY ARES NET GAIN NET LOSS	☐ LESS THAN \$5,000 WAL ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ \$5,000\$9,999 MART STOLE SPOUSE 100 TO 499 □ 10,000 OR MOR □ \$5,000\$9,999	DEPENDENT CHIL	_D ☐ 1,000 TO 4,999
BUSINESS ENTIT STOCK HELD OR NUMBER OF SHA	NET LOSS Y ACQUIRED BY ARES NET GAIN NET LOSS Y	☐ LESS THAN \$5,000 WAL ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ \$5,000\$9,999 MART STOLE SPOUSE 100 TO 499 10,000 OR MOR \$5,000\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	_D ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
BUSINESS ENTITE STOCK HELD OR NUMBER OF SHA	NET LOSS Y ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN \$5,000 WAL FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ \$5,000-\$9,999 MART STOLE SPOUSE □ 10,000 OR MOR □ \$5,000-\$9,999	DEPENDENT CHIL 500 TO 999 E \$10,000-\$24,999	_D ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
BUSINESS ENTITE STOCK HELD OR NUMBER OF SHA IF SOLD BUSINESS ENTITE STOCK HELD OR	NET LOSS Y ACQUIRED BY ARES NET GAIN NET LOSS Y ACQUIRED BY	LESS THAN \$5,000 WAL FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000	□ \$5,000\$9,999 MART STOLE SPOUSE □ 10,000 OR MOR □ \$5,000\$9,999 RLD Wing E	DEPENDENT CHIL	_D
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STOCK					PART 2
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and indicate the ca	tegory of the numb mount of the net	, your spouse, or a dep per of shares held or ac gain or loss realized	quired. If some or	all of the stock was	sold, also indicate the
		dependent child's ac child is listed on the Co		child about whom	you are reporting by
¹ BUSINESS ENTI	ΤΥ	FIDELIT		AME MONEY MKT	
² STOCK HELD OF	R ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHI	LD
3 NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 RE	☐ 1,000 TO 4,999
4 IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
BUSINESS ENTI	ſΥ	ET4AN	ALLEN INT	ame Briors	.*
STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHA	ARES	LESS THAN 100	🔏 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN NET LOSS	☐ LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000–OR MORE
BUSINESS ENTIT	ſΥ	LEGGE	TT + PLATT	INC	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHA	ARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	100 TO 499	☐ 500 TO 999 E ♥	1,000 TO 4,999
IF SOLD	☐ NET GAIN ☑ NET LOSS	☑ LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
BUSINESS ENTIT	ſY	NORDSTRO		AME	
STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	
NUMBER OF SHA	ARES	LESS THAN 100	🔀 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE
BUSINESS ENTI	ſΥ	TALBOTS	INC	AME	
STOCK HELD OF	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHA	ARES	LESS THAN 100	☑ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	·
IF SOLD	M NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
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Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

NOTAPPLICABLE List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the nert gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whorn you are reporting by providing the number under which the child is listed on the Cover Sheet. **BUSINESS ENTITY** FOR LITY LA MANAGED HALL (INDICATE) LA MANAGED HALL (STOCK					PART 2	
and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. BUSINESS ENTITY FOR LITTY	NOTAPPLIC	CABLE					
Providing the number under which the child is listed on the Cover Sheet. BUSINESS ENTITY	and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS						
2 STOCK HELD OR ACQUIRED BY	, .		-	•	child about whom	you are reporting by	
LESS THAN 100	¹ BUSINESS ENTI	TY	FIDELITY ILA FROM CAS	MANAGED A	MET (MANDATORY (MONEY MA	DISTRIBUTION)	
	² STOCK HELD OF	R ACQUIRED BY				,	
IF SOLD	3 NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
NET LOSS			☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE		
STOCK HELD OR ACQUIRED BY	4 IF SOLD		LESS THAN \$5,000	\$5,000—\$9,999	\$10,000-\$24,999	\$25,000-OR MORE	
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5,000 TO 9,999	STOCK HELD OF	R ACQUIRED BY	FILER				
F SOLD	NUMBER OF SH	ARES				☐ 1,000 TO 4,999	
BUSINESS ENTITY STOCK HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD			☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE		
STOCK HELD OR ACQUIRED BY	IF SOLD	<u> </u>	LESS THAN \$5,000	\$5,000—\$9,999	\$10,000\$24,999	\$25,000OR MORE	
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5,000 TO 9,999	STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI		
SOLD	NUMBER OF SH	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
NET LOSS			☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
STOCK HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD	IF SOLD		LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
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5,000 TO 9,999	STOCK HELD OF	R ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	D	
SOLD	NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
NET LOSS			□ 5,000 то 9,999	10,000 OR MOR	E		
STOCK HELD OR ACQUIRED BY FILER SPOUSE DEPENDENT CHILD NUMBER OF SHARES LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 5,000 TO 9,999 10,000 OR MORE IF SOLD NET GAIN LESS THAN \$5,000 \$5,000-\$9,999 \$10,000-\$24,999 \$25,000-OR MORE	IF SOLD		LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000OR MORE	
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□ 5,000 TO 9,999 □ 10,000 OR MORE IF SOLD □ NET GAIN □ LESS THAN \$5,000 □ \$5,000—\$9,999 □ \$10,000—\$24,999 □ \$25,000—OR MORE	STOCK HELD OF	R ACQUIRED BY	☐ FILER	☐ SPOUSE		_D	
IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000—\$9,999 ☐ \$10,000—\$24,999 ☐ \$25,000—OR MORE	NUMBER OF SHA	ARES		_		☐ 1,000 TO 4,999	
	IF SOLD		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE		
	IF SOLD	□ NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE	

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	THER COMMERCIAL PAPER PART 3 PAGE 1/2
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calendar year. If sold, indicate the information, see FORM PFSINSTF	
	t a dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet.
DESCRIPTION OF INSTRUMENT	PERSONAL LOAN TO LEE LEFFINGWELL CAMPAIGN
² HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
3 IF SOLD	LL Tarana manage Tarana manage Tarana
☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999
· □ NET LOSS	
DESCRIPTION OF INSTRUMENT	FIDELITY IRA MANAGED BY CENTURY MANAGEMENT VARIOUS BONDS, MONEY MARKET FUND
HELD OR ACQUIRED BY	☑ FILER ☐ SPOUSE ☐ DEPENDENT CHILD
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,999 ☐ THE
	FIDELITY INVESTMENT ACCT.
DESCRIPTION OF INSTRUMENT	VARIOUS MONEY MARKET FUNDS
HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
IF SOLD	
☐ NET GAIN	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000 OR MOR E
☐ NET LOSS	
COPY AI	ND ATTACH ADDITIONAL PAGES AS NECESSARY

(512) 463-5800

IF SOLD

☐ NET GAIN

☐ NET LOSS

BONDS, NOTES & OTHER COMMERCIAL PAPER PART 3 PAGE2 NOTAPPLICABLE List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. FIDELITY INVESTMENT ACCT. DESCRIPTION OF INSTRUMENT MONEY MACKET FUNDS HELD OR ACQUIRED BY DEPENDENT CHILD _____ ☐ FILER LL IF SOLD ☐ NET GAIN ☐ NET LOSS **DESCRIPTION** OF INSTRUMENT HELD OR ACQUIRED BY ☐ FILER SPOUSE ☐ DEPENDENT CHILD _____ IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ NET GAIN ☐ NET LOSS DESCRIPTION OF INSTRUMENT HELD OR ACQUIRED BY FILER SPOUSE ☐ DEPENDENT CHILD ___

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LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5						
NOTAPPLICABLE	NOTAPPLICABLE					
interest, dividends, royalties, and re	List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFSINSTRUCTION GUIDE.					
When reporting information about providing the number under which			e child about whom you are reporting by			
1 SOURCE OF INCOME	NAME AND ADDRESS VELOCITY (REDIT UNION 505 BARTON SPRINGS RD- AUSTIN, TX 78704					
² RECEIVED BY	FILER	2 SPOUSE	DEPENDENT CHILD			
3 AMOUNT	\$500\$4,999	55,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
SOURCE OF INCOME	FIDELITY	NAME AND	DADDRESS ACCTS			
RECEIVED BY	☑ FILER	Z spouse	DEPENDENT CHILD			
AMOUNT	\$500\$4,999	\$5,000\$9,999	\$10,000-\$24,999 \$25,000-OR MORE			
SOURCE OF INCOME		NAME AND) ADDRESS			
RECEIVED BY	☐ FILER	☐ SPOUSE	DEPENDENT CHILD			
AMOUNT	\$500\$4,999	\$5,000\$9,999	☐ \$10,000-\$24,999 ☐ \$25,000OR MORE			
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PERSONAL NOTES AND LEASE AGREEMENTS

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PART 6

	/
V	NOTAPPLICABLE

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by

providing the number under which the child is listed on the Cover Sheet.					
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT					
² LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD		
3 GUARANTOR					
4 AMOUNT	S1,000\$4,999	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT					
LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD		
GUARANTOR					
AMOUNT	\$1,000\$4,999	\$5,000 \$ 9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT					
LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD		
GUARANTOR					
AMOUNT	S1,000\$4,999	\$5,000\$9,999	\$10,000\$24,999 \$25,000-OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

INTERESTS IN REAL PROPERTY PART 7A							
NOTAPPLICABLE							
Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFSINSTRUCTION GUIDE.							
	When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.						
1 HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD				
2 STREETADDRESS NOTAVAILABLE CHECK IF FILER'S HOME ADDRESS	,	STREET ADDRESS, INCLUBALCONES DR					
3 DESCRIPTION DOTS ACRES			ND NAME OF COUNTY WHERE LOCATED				
A NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)							
F SOLD NET GAIN NET LOSS	☐ LESS THAN \$5	5,000 🗌 \$5,000\$9,999	9	RE			
HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD				
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	•	STREET ADDRESS, INCLU N. 8 TH ST UP CITY, NE	DING CITY, COUNTY, AND STATE				
DESCRIPTION LOTS ACRES		NUMBER OF LOTS OR ACRES AN	ID NAME OF COUNTY WHERE LOCATED				
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)							
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$8	5,000 🗆 \$5,000–\$9,999	9 🔲 \$10,000\$24,999 🔲 \$25,000-OR MO	RE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY							

Texas Ethics Commission P.O.	Box 12070	Austin, Texas 78711-207	70 (512) 463-5	5800 1-800-325-8506
INTERESTS IN BUSIN	NESS ENTI	TIES		PART 7B
NOTAPPLICABLE				
Describe all beneficial interests in be calendar year. If the interest was so For an explanation of "beneficial in INSTRUCTION GUIDE. When reporting information about providing the number under which the sales in	ld, also indicate th nterest" and othe a dependent ch	e category of the amount or specific directions for of ild's activity, indicate the	of the net gain or loss completing this section	realized from the sale. on, see FORM PFS
1 HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT C	HILD
DESCRIPTION			DADDRESS ler's Home Address)	
	·			
3 IF SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000	\$10,000\$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	FILER	SPOUSE	☐ DEPENDENT C	HILD
DESCRIPTION			DADDRESS ler's Home Address)	
			. *	
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000	\$10,000\$24,999	□ \$25,000OR MORE
HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT C	HILD
DESCRIPTION			D ADDRESS ler's Home Address)	
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000	\$10,000-\$24,999	☐ \$25,000–OR MORE
COPY A	ND ATTACH AI	ODITIONAL PAGES AS	NECESSARY	

TRUST INCOME	PART 9
NOTAPPLICABLE	
category of the amount of income re than \$500 in income, if the identity of When reporting information about	ived by you, your spouse, or a dependent child as beneficiary of a trust and indicate the eceived. Also identify each asset of the trust from which the beneficiary received more of the asset is known. For more information, see FORM PFSINSTRUCTION GUIDE. a dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet.
SOURCE	DELTA PILOTS RETIREMENT TRUST
² BENEFICIARY	FILER SPOUSE DEPENDENT CHILD
3 INCOME	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☑ \$25,000-OR MORE
4 ASSETS FROM WHICH OVER \$500 WAS RECEIVED	
UNKNOWN	
SOURCE	U.S. DEDARTMENT OF DEFENSE MILITARY RETIREMENT
BENEFICIARY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD
INCOME	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED UNKNOWN	
SOURCE	NAME OF TRUST FUND
BENEFICIARY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD
INCOME	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999 ☑ \$10,000-\$24,999 ☐ \$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED	
UNKNOWN	
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

BLIND TRUSTS			PART 10A	
NOTAPPLICABLE				
Identify each blind trust that compli	Identify each blind trust that complies with section 572.023(c) of the Government Code. See FORM PFS—INSTRUCTION GUIDE.			
	When reporting information about a dependent child's activity, indicate the child about whom you are reporting b providing the number under which the child is listed on the Cover Sheet.			
1 NAME OF TRUST				
² TRUSTEE		NAME AI	ND ADDRESS	
3 BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD	
⁴ FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE	
5 DATE CREATED				
NAME OF TRUST				
TRUSTEE	NAME AND ADDRESS			
p=-		·		
BENEFICIARY	FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000-\$24,999 ☐ \$25,000OR MORE	
DATE CREATED				
NAME OF TRUST				
TRUSTEE		NAME AN	D ADDRESS	
BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT CHILD	
FAIR MARKET VALUE	LESS THAN \$5,000	\$5,000-\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE	
DATE CREATED				
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

TRUSTEE STATEMENT

P.O. Box 12070

PART 10B

- D		
	NOTAPPLICABLE	

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

		lant.
1	NAME OF TRUST	
2	TRUSTEE NAME	
3	FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
4	TRUSTEE STATEMENT	I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.
		Trustee Signature

§ 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
 - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;
 - (14) identification of each blind trust that complies with Subsection (c), including:
 - (A) the category of the fair market value of the trust;
 - (B) the date the trust was created;
 - (C) the name and address of the trustee; and
 - (D) a statement signed by the trustee, under penalty of perjury, stating that:
 - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
 - (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
 - (1) the trustee:
 - (A) is a disinterested party;
 - (B) is not the individual;
 - (C) is not required to register as a lobbyist under Chapter 305;
 - (D) is not a public officer or public employee; and
 - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
 - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

ASSETS OF BUSINESS ASSOCIATIONS

P.O. Box 12070

PART 11A

(512) 463-5800

abla	NOTAPPLICABLE
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Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet

¹ BUSINESS ASSOCIATION	NAME AND ADDRESS [(Check If Filer's Home Address)			
² BUSINESS TYPE				
³ HELD, ACQUIRED, OR SOLD BY	☐ FILER	SPOUSE	DEPENDENT CH	HILD
4 ASSETS	DES	CRIPTION	CATEGO	DRY
7.002,0			LESS THAN \$5,000	\$5,000\$9,999
			\$10,000-\$24,999	\$25,000OR MORE
			 	55,000\$9,999
			\$10,000-\$24,999	\$25,000OR MORE
			☐ LESS THAN \$5,000	\$5,000\$9,999
	,		\$10,000-\$24,999	\$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999
			I -	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000 [□ \$5,000\$9,999 □ \$25,000OR MORE
		· · · · · · · · · · · · · · · · · · ·	LESS THAN \$5,000 [☐ \$5,000-\$9,999 ☐ \$25,000-OR MORE
			LESS THAN \$5,000 [\$5,000\$9,999 \$25,000OR MORE

P.O. Box 12070 LIABILITIES OF BUSINESS ASSOCIATIONS PART 11B NOTAPPLICABLE Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS BUSINESS (Check If Filer's Home Address) **ASSOCIATION** ² BUSINESS TYPE 3 HELD, ACQUIRED, ☐ FILER ☐ SPOUSE □ DEPENDENT CHILD — OR SOLD BY DESCRIPTION CATEGORY LIABILITIES ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 ☐ \$25,000--OR MORE **\$10,000-\$24,999** ☐ LESS THAN \$5,000 ☐ \$5,000—\$9,999 **\$10,000--\$24,999** ☐ \$25,000-OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000—\$9,999 \$10,000--\$24,999 ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 \$5,000--\$9,999 **\$10,000-\$24,999** ☐ \$25,000—OR MORE LESS THAN \$5,000 \$5,000--\$9,999 **\$10,000-\$24,999** ☐ \$25,000-OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 **\$10,000--\$24,999** ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000—\$9,999 **\$10,000--\$24,999** ☐ \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 **\$10,000--\$24,999** ☐ \$25,000-OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND E	EXECUTIVE PO	DSITIONS	PART 12			
NOTAPPLICABLE						
List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS—INSTRUCTION GUIDE.						
When reporting information providing the number under the number under the number under the number that the nu			e child about whom you are reporting by			
1 ORGANIZATION	CAPITAL A	AREA METROPOLITAN	PLANNING ORG,			
POSITION HELD	BOARD N	NOMBER_				
POSITION HELD BY	☑ FILER	SPOUSE	DEPENDENT CHILD			
ORGANIZATION						
POSITION HELD						
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD			
ORGANIZATION						
POSITION HELD	·					
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD			
ORGANIZATION						
POSITION HELD						
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD			
ORGANIZATION						
POSITION HELD						
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY						

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

P.O. Box 12070

PART 13

X	NOTAPPLICABLE

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS-INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS
² AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY

INTEREST IN BUSINI	ESS IN COM	MON WITH LO	DBBYIST	PART 14	
NOTAPPLICABLE					
Identify each corporation, firm, partn sional association, joint venture, or spouse, or a dependent child, and a p an interest. For more information, se	other business asso person registered as	ociation, other than a p a lobbyist under chapte	ublicly-held corporation,	in which you, your	
BUSINESS ENTITY		NAME AF	ND ADDRESS		
² INTEREST HELD BY	FILER	☐ SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME AF	ND ADDRESS		
INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME AN	D ADDRESS		
1990			·		
INTEREST HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME AN	D ADDRESS		
·					
INTEREST HELD BY	☐ FILER	☐ SPOUSE	DEPENDENT CHILD		
BUSINESS ENTITY		NAME ANI	D ADDRESS		
INTEREST HELD BY	FILER	SPOUSE	DEPENDENT CHILD		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

FEES RECEIVED FOR SERVICES RENDERED TO A LOBBYIST OR LOBBYIST'S EMPLOYER

PART 15

) P	(FORBAI2)	OKL	OBBI	l 611	2 [
X	NOTAPPLICABLE				

NOTAPPLICABLE				
Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFSINSTRUCTION GUIDE.				
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000 \$24 ,999	\$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000 \$ 9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	☐ LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED				
FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

REPRESENTATION BY LEGISLATOR BEFORE STATE AGENCY

PART 16

NOTAPPLICABL	E
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This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS--INSTRUCTION GUIDE.

Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerial acts on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003.

1 STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000	55,000\$9,999	☐ \$10,000—\$24,999	☐ \$25,000OR MORE
STATE AGENCY				
PERSON REPRESENTED				
FEE CATEGORY	LESS THAN \$5,000	55,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
STATE AGENCY				
STATE AGENCY PERSON REPRESENTED				
	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999	□ \$25,000OR MORE
PERSON REPRESENTED	LESS THAN \$5,000	\$5,000 \$ 9,999	☐ \$10,000\$24,999	□ \$25,000OR MORE
PERSON REPRESENTED FEE CATEGORY	LESS THAN \$5,000	\$5,000\$9,999	☐ \$10,000\$24,999	\$25,000OR MORE
PERSON REPRESENTED FEE CATEGORY STATE AGENCY	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BENEFITS DERIVED FROM FUNCTIONS HONORING **PUBLIC SERVANT**

PART 17

\square	NOTAPPLICABLE	

Texas Ethics Commission

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS-INSTRUCTION GUIDE.

Austin, Texas 78711-2070

	·				
SOURCE OF BENEFIT	NAME AND ADDRESS				
² BENEFIT					
SOURCE OF BENEFIT	NAME AND ADDRESS				
BENEFIT					
SOURCE OF BENEFIT	NAME AND ADDRESS				
BENEFIT					
SOURCE OF BENEFIT	NAME AND ADDRESS				
BENEFIT					
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

☐ YES

☐ NO

WAS CONTINUANCE

GRANTED?

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

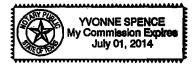
P.O. Box 12070

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

> I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2009, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.



AFFIX NOTARY STAMP / SEAL ABOVE



-1 - ρ	20 <u>/ /</u> , to certify whi	ich, witness my hand a	ind seal of office.	
1 1				
\(///				1.
Juanne	Jenee 7	Vonne Spa	ence	NOF219
Signature of officer administering		of officer administering oath	Title	of officer administering oath

Sworn to and subscribed before me, by the said Lee Letting well, this the 27th day of