

MEMBER/OFFICER/EMPLOYEE FINANCIAL DISCLOSURE EXTENSION REQUEST FORM

Name of Requestor: Representative Maxine Wi	aters Date: May 15, 2024
Employing Member/Committee/Office: Represe	entative Maxine Waters
Financial Disclosure Statement Type (check one): Annual (CY 2023) Amendment The length of time for which extension is requested.	New Employee Termination 2024 HAY
(If days granted differ from days requested) Reason: Total days requested exceeds 9	•
Your request for an extension of time in which referenced above is hereby granted. Your FD must be committee may grant additional requests, we from the original due date. Please note that if the dayou intend to file using the paper form, your FD later than close of business on the last business data date.	which may not, in the aggregate, exceed 90 days late listed in this paragraph is on a weekend and must be received by the Clerk of the House no
Date: 5/16/2024	
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Chairman	Ranking Member
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