# PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	esponse.	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	and the	e answered	Each question in this part must b
<sub>S</sub>	Yes 🔲	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years?  If yes, complete and attach Schedule VI.	<del>₹</del>	Yes	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.
S N	Yes 🔀	V. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule V.	<u>₹</u>	řes K	II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.
<b>₹</b>	Yes X	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	N <sub>S</sub>	Yes X	<ol> <li>Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?</li> <li>ff yee, complete and attach Schedule I.</li> </ol>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

**TRUSTS**—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?

**EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes

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Yes

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## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

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exceeding \$1,000. See examples below.	more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income	List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or
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#### BLOCK A Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.

Provide complete names of stocks and mutual funds (do not use ticker symbols).

For all IRAs and other retirement plans (such as 401 (k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.

For rental or other real property held for investment provide a complete address.

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For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.

Exctude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a tederal retirement program, including the Thrift Savings Plan.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left.

For a detailed discussion of Schedule III requirements, please refer to the instruction booklet:

None

\$1,001 - \$15,000

DC, Examples

SP Mega Corp. Stock
Simon & Schuster

st Bank of Paducah, KY accounts

BLOCK B
Value of Asset

Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."

BLOCK C

#### Type of Income

Check all columns that apply. For retirement accounts that do not allow you to choose specific investments <u>or</u> that generate tax-deterred income (such as 401(k) plans or IRAs), you may check the "None" column. **Dividends**, interest, and capital gains, even if relinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.

BLOCK D

#### **Amount of Income**

For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Donovan 1. Rivers

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	* BLOCK A	вгоск в	вгоск с		BLOCK D
	Asset and/or Income Source	Value of Asset	Type of Income		Amount of Income
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### SCHEDULE III — LIABILITIES

Name DNOVAN Likivers

Page 5 of 2

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sib-

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### SCHEDULE IV — POSITIONS

prise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enter-Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offi-

and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

Position	Name of Organization
Funder/ceo	Stay town In Side / Pat Consultants
Founder 1 CEO	Davisan's Clowing & Rainting & Landscaping
enduse Inspection	King County Imerico
Foundar / Chauman OFB	AC Mc/AC - AM Clergy All Commanity Advisory Council
Funday Pular	~ 1 ~ 1

'Use additional sheets if more space is required.

## SCHEDULE V - AGREEMENTS

Name Danovan L. Rivers

Page # of 1

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efit plan maintained by a former employer.	service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or ben-	Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government

Date	Parties To	Terms of Agreement
04/11/12	Danopares Cleaning Haisting / Landscoping	
offulra	Stay force Inside Out Training Consultant's	60 10 forth
04/11/12	Body of Christ On Church for God zwe no	Complete !
دا ایران	All Close All Community Polyisary Course!	70% of Profet
04 112	Prefer de Resource Business & Land Contras	
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# SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
Thing & Assa BATC.	MA
Stay Focus Inside Mut Munin	NA
Booky of Church has Church's	NA
All Charge All Consumber Advis Courses	N/A-