Page 1 of 9

against anyone who files more than A \$200 penalty shall be assessed

IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?

If yes, complete and attach Schedule IV. V. Did you, your spouse, or a dependent child have any reportable If yes, complete and attach Schedule III. 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. If yes, complete and attach Schedule V. liability (more than \$10,000) during the reporting period? Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the Did you, your spouse, or a dependent child receive "unearned" reporting period? appropriate schedule attached for each "Yes" response Each question in this part must be answered and the <u>8</u> **₹** ö S 0 X X X

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Page 2_of

SCHEDULE I— 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 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 exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

								Virainia Consultants LLC	Ontario County Board of Education	Examples: Civil War Roundtable (Oct. 2nd)	State of Maryland	Keene State	Source	
	e de la constanta de la consta						, ,	Sporge Salary	Spouse Salary	Spouse Speech	Legislative Pension	Approved Teaching Fee	Туре	
			a de la companya de l					NA	NA	\$1,000	\$9,000	\$6,000	Amount	

9	7	10105, 56.	novay	Va
Page 3 of 9)	Eiler	e.L.	Name)

SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package.

SourceActivityDateAmountExamples:Association of American Associations, Washington, DCSpeechFeb. 2, 2010\$2,000XYZ MagazineArticleArticleAug. 13, 2010\$500						

536 Somestown Rd Chestopent Homes Content Assossment 196,300	Bldg, LONZ ODE	Signal Vi	1391 Duck Kd, Van	1st Bank of Paducah, KY Accounts	SP	ment 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. 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. Exclude: 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 a personal checking or saving accounts; and any financial interest in, or income derived from, a federal 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.	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 retire-
	X		X	X	nnefinite X	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$250,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$7	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."
×	X		X	X	X X Royalties	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTEDBLIND TRUST Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	BLOCK C Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or 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 reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
×				X	×	None	Amount of income Amount of income For retirement accounts that do not allow you to choose specific investments at 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.
					S (partial)	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

 \exists

None

\$1 -- \$1,000

\$1,001 - \$15,000

\$15,001 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$250,000

\$250,001 - \$500,000

\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000

\$5,000,001 - \$25,000,000

\$25,000,001 - \$50,000,000

EXCEPTED/BLIND TRUST

Other Type of Income

Over \$50,000,000

CAPITAL GAINS

(Specify: e.g., Partnership Income or Farm Income)

None

\$1 - \$200

\$201 - \$1,000

\$1,001 -- \$2,500

\$2,501 - \$5,000 \$5,001 -- \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000

Over \$5,000,000

NONE DIVIDENDS RENT INTEREST

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Continuation Sheet (if needed) Asset and/or Income Source BLOCK A Value of Asset BLOCK B
Year-End of Income BLOCK C Type Name Jamos Amount of Income BLOCK D Page 5 of 7 Transaction BLOCK E

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SCHEDULE IV— TRANSACTIONS

Name Javes Rawdy Forbes, Sc

Page 6 of 2

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.
ates rental income. If only a portion of an asset is soid, please so indicate (<i>l.e.</i> , "partial sale"). See example below.
dren, or the purchase or sale of your personal residence, unless it gener-
action. Exclude transactions between you, your spouse or dependent chil-
resulted in a capital loss. Provide a brief description of any exchange trans-
erty held for investment that exceeded \$1,000. Include transactions that
or dependent child during the reporting period of any security or real prop-
Report any purchase, sale, or exchange transactions by you, your spouse,

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dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	sulted in a capital loss. Provide a tion. Exclude transactions between	eport any purchase, sale, or exceed to held for investment that exceet held for investment that exceets held for investment that exceets.
creft, or the purchase or sale of your personal resource, unless it generates rental income. If only a portion of an asset is soid, please so indicate (i.e., "partial sale"). See example below.	resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-	or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000, include transactions that
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E HANGE		ction
(Box if C Exceede	apital d \$200	
Quarterly, Monthly, or	(MO/DAY/YR)	Date
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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transactions that resulted in a capital sale"). See example below. Capital Gains — if a sales transaction resulted in a capital gains box and disclose this income on Schedule set. P. DC, JT Mega Corporation Common Stock (partial sale) X Mega Corporation Common Stock (partial sale) X Mega Corporation Common Stock (partial sale) X Monthly, or specified that sales the specified sale is sold, please so indicate the capital gains box and disclose this income on Schedule X Monthly, or specified sale is sold, please so indicate the capital gains box and disclose this income on Schedule X Monthly, or specified sale is sold, please so indicate the capital gains box and disclose this income on Schedule X Monthly, or specified sale is sold, please so indicate the capital gains box and disclose this income on Schedule X Monthly, or specified sale is specifi	1		<u>o</u> !		
of any security or real proposed. Include transactions that prion of any exchange transpose of transactions that prion of any exchange transpose or dependent chillesistic sold, please so individe the sold, please sold, plea		SP	SP, DC, JT	resulted in action. Exderen, or the ates rental cate (<i>l.e.</i> , Capital Ga of \$200, ch III.	Report and or dependent held to
of any security or real proposed. Include transactions that prion of any exchange transpose of transactions that prion of any exchange transpose or dependent chillesistic sold, please so individe the sold, please sold, plea		Example:		a capital los dude transal e purchase income. If come. If come if a sale income	/ purchase, ent child dur or investme
PURCHASE SALE EXCHANGE Check Box if Capital Gain Exceeded \$200 Check Box if Capital Gain Exceeded \$200 MO/DAY/YR) Place Bi-weekly, if \$1,001-\$15,000 \$15,001-\$15,000 \$550,000 \$550,000-\$100,000 \$550,000-\$1,000,000 \$5,000,001-\$250,000 \$5,000,001-\$250,000 \$5,000,001-\$250,000 \$5,000,001-\$250,000 \$5,000,001-\$250,000 \$5,000,001-\$250,000 \$5,000,001-\$250,000,000 \$5,000,0001-\$250,000,000 \$50,000,0000 \$50,000,0001-\$250,000,000 \$50,000,0000		Mega Corporation Common Stock (r	Asset	s. Provide a brief description of any exc stions between you, your spouse or de or sale of your personal residence, unl inly a portion of an asset is sold, pie i"). See example below. itales transaction resulted in a capital gital gains" box and disclose this income	sale, or exchange transactions by you, ing the reporting period of any security in that exceeded \$1,000. Include tran
Check Box if Capital Gain Exceeded \$200 10-12-10 Check Box if Capital Gain Exceeded \$200 Check Box if Capital Gain Exceeded \$200 Check Box if		artial sale)		hange trans- pendent chil- ess it gener- ase so indi- asin in excess on Schedule	your spouse, or real prop- sactions that
Check Box if Capital Gain Exceeded \$200 10-12-10 Check Box if Capital Gain Exceeded \$200 Check Box if Capital Gain Exceeded \$200 Check Box if	The Real Property lies, in which the			PURCHASE	of Tr
Check Box if Capital Gain Exceeded \$200 10-12-10 Check Box if Capital Gain Exceeded \$200 Check Box if Capital Gain Exceeded \$200 Check Box if		×		SALE	Type ansa
Gain Exceeded \$200 Compared to the state of the state	The state of the same			EXCHANGE	ction
Date Date D)
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SCHEDULE V— LIABILITIES

Name Jumps Rously Forbs, St, Page 7 of

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 owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, 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 sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

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SCHEDIII F VI— GIFTS	Congressional Fed. Chedit Union	Wells Fajan Financial	Petit) Parao	العين	Wells Fargo		Southust Rout		ball of America	0	Example: First Bank of Wilmington, DE	Creditor			
											May 1998	Incurred Mo/Year	Liability	Dete	
	time of credit	Tastallment Loan	Chesapeake Va	Mortgage on 506 Johnston	Rd. Date wil	Mortgage on 1391 Des	Boat Logal	1 6)	Pd. 'Chesaporte its.	mortgage on 524 Johnston	Mortgage on 123 Main St., Dover, DE	Type of Liability		1000000	
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	X					,						\$15,001- \$50,000	8		
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Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345
AIN		

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/	Forbesse
	Page 8

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Υ	Υ	2 Days
ΗM						
					_	

SCHEDULE VIII—POSITIONS

Name James Randy Fastes Sc, Page 4 of 4

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

zations); 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 political parties and campaign organi-

Position	Name of Organization
A la	

SCHEDULE IX—AGREEMENTS

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 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 benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	