

## MEMBER/OFFICER/EMPLOYEE FINANCIAL DISCLOSURE EXTENSION REQUEST FORM

Name of Requestor: Jody Hice  Please type or print legibly	
Employing Member/Committee/Office: Hice	ATIVE RED MAY 20 OFFICE OF RE
Financial Disclosure Statement Type (check one):  Annual (CY 2015)	New Employee Termination 22
The length of time for which extension is requeste	d (check one):
30 days 60 days 90 days Ot	her
	Specify number of days or specific date
For Ethics Committee Use Only	By Carlot Control of the Control of
Days granted:	
(If days granted differ from days requested)  Reason: Total days requested exceeds 9	90.
Your request for an extension of time in which to referenced above is hereby granted. Your FD must Ethics Committee may grant additional requests days from the original due date. Please note the weekend and you intend to file using the paper for the House no later than close of business on the later than close of business of bus	which may not, in the aggregate, exceed 90 at if the date listed in this paragraph is on a form, your FD must be received by the Clerk of
Charles W. Dent, Chairman	Linda T. Sánchez, Ranking Member

Copy to: Legislative Resource Center, 135 CHOB

(This page will be publicly disclosed)

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