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.

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 that benefits you, your spouse, or your dependent child?

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SCHEDULE A - ASSETS & "UNEARNED INCOM

EARNES INCOME"
Name PROPELLANGER PAGE 2 of 7
Page 2 of 7

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name DIENUAL LAWRENCE PAGE

SCHEDULE C - EARNED INCOME

Name: XPNDA	
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awkence Page: 5 of 7	

ist the source, type nd filer's spouse, it XCLUDE: Military WCOME LANT'S au tembers and emplo rafessional service	List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's 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. INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2014 limit on outside earned income for Nambers and employees compensated at or above the "senior staff" rate was \$26,955. The 2015 limit is \$27,225. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.	amployment by the U.S. government by the U.S. government by the U.S. government by the U.S. government income exceeding \$1.00 benefits received under the Socioome may apply to you after your first \$27,225. In addition, certainst to \$27,225.	ent) totaling \$200 or more during the IOO. See exemples below. Its Security Act. In are on House payroll. The 2014 in types of income (notably honorari	nt) totaling \$200 or more during the reporting period. For both the filer 10. See examples below. If Security Act. If are on House payrol. The 2014 Smit on outside earned income for a types of income (notably honorada, director's fees, and payments for a types of income (notably honorada, director's fees, and payments for
SAME SECTIONS	O Mischael & London by London by the control of the			
		ì	Amo	Amount
တ္	Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
		Honoruium	90\$	\$500
,	AGC Transfer A. Carrier, and (AGY 19)	Salary	\$20,000	\$76,000
Examples:	Cid War Roundaile (Oct. 2)	Spoules Speech	8	21.000
	Ontario County Bonro of Education	Spouse Selary	V	

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.	w staff.		
			Amount
Source (include date of receipt for honoraria)	Type	Current Year to Filing	Preceding Year
ABC Trade Association, Buttings, MD (July 15)	Honoratura	\$20,000	\$500 \$76, 90 0
Examples: CM Wir Round Affect (Oct. 2)	Spouse Speech	WA SO	NA NA
The Southfield MI	Salary	47,000.00	47,000.00 47,000.00

Name: BRENDA L. LAWRENCE PAG	
Page b. of 7	
of 7	

exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.	Report lial period. A (unless you
\$10,000	Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your depends period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in viriabilities over the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., or
Column	ver \$10,00 vers: Mem ut or are a
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	nt owed of pe on you are po close of
	personal the report
	Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liabile); and it abilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period it abilities over the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period
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		TW PIST TOO	くっていること	wen) n	First Bank of Wilersington, DE	Creditor		
			October	3000	, av.	Date Liability incurred MO/YR		
			Son frield MI	2000 23668 LAShe	Mortgage on Rental Property, Dover, Bli	Type of Liability		
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				×		\$50,001- \$100,000	ο΄	
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-						\$500,001- \$1,000,000		Amount of Liability
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						\$5,000,001- \$25,000,000	=	
						\$25,000,001- \$50,000,000	-	
						Over \$50,000,000	-	
			F	,		Over \$1,000,000*		3

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonposition granization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entitles (such as political parties and campaign organizations); and positions society of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
SORE Member	TROVINENCE HOSIPTIAL
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SCHEDULE F - AGREEMENTS

Name: BRENDA L LAWRENCE PAGE 7 of 7

Identify the decontinuation o	ste, parties to, and general terms of any agreement or arrangement that you have deferral of payments by a former or current employer other than the U.S. gove	Identify the date, parties to, and general terms of any agreement or arrangement that you have 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 Agreement	Terms of Agreement
7007	2007 City of Southfield MJ.	Manage Retirement 457 Flan

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

Source (Name and City/State)	Brief Description of Duties
Earnate: Doe Jones & Smith, Homelown, Homestate	Accounting Services
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