Form A

UNITED STATES HOUSE OF REPRESENTATIVES

₹	of the state of t	child because	sactions, or liabilities of a spouse or dependent child because vith the Committee on Ethics.	" income, trans rst consulted w	ssets, "unearnec nless you have fi	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spot they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
<u>₹</u>	Yes	closed. Have you	d certain other "excepted trusts" need not be disclosed. Have you	on Ethics and dependent chil	y the Committee your spouse, or	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
8	NOLLSAR	F THESE Q	MATION — ANSWER EACH OF THESE QUESTIONS	T INFORI	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	wered and "Yes" respo	must be ans ed for each	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	No 🔀	yes	V. 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 V.
<u>X</u> §	Yes	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity?If yes, complete and attach Schedule IX.	No	Yes	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.
8 [/]	¥ ₈₈	or before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	₽	**************************************	III. 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 III.
₽	Yes	d receive any n the reporting	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	N N	Yes	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
₹	Yes	receive any regating more	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.		° Yes ∑	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.
			E QUESTIONS	OF THES	ER EACH	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS
	30 days late.	30 days late.	Termination Date:		Amendment	Type Annual (May 16, 2011)
assessed	\$200 penalty shall be assessed	A \$200 pena	r Employing Office:	Officer or Employee	3	Filer Member of the U.S. State: Status
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3	JUN 1 4 2011	بِ	For use by Members, officers, and employees	MENT	URE STATE	CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

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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 expending \$1 pm. Soc. commission below.

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.	nd benefits received under the Social Se	ecurity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
_		\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	N.
HORGEN STRINGER SHITH BORNEY (MSSB)	SPOUSE SAMPLY	マスタ

	ST CHIGENS	7	ST CHLUERS	21 H258	858H	σ	Examples:	SP, SP	ment accounts which are not the name of the institution ho value at the end of the reportir For rental or other real propert vide a complete address. For an ownership interest in that is not publicly traded, staness, the nature of its activities tion in Block A. Exclude: Your personal resistion in a personal or less in a personal resistion in a personal resisting the reporting pring \$5,000 or less in a personal resisting the reporting pring \$5,000 or less in a personal resisting the reporting principle into the resisting the reporting principle in a personal resisting the reporting principle in a personal resistance in the	Asset and/o Identify (a) each asset to fincome with a fair me the end of the report reportable asset or sould more than \$200 in "une Provide complete name not use ticker symbols.) For all IRAs and other plans) that are self-direct the power, even if not investments), provide the account that exceeds the
Control	DOUB (making Stock		ACAMON NOT THE TO	TISCHE () SURPLY	TORGON STANLEY SH	1st Bank of Paducah, KY Accounts		P Mega Corp. Stock	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 inherest 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 knoome 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.) Provide complete names of stocks and mutual funds (do not use ticker symbols.) Provide complete names of stocks and mutual funds (do not use ticker symbols.) Provide complete names of stocks and mutual funds (do not use ticker symbols.) 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-
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SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

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- OTTENHENEUZ DEN HILT FO	-LM. Em MARKET FD	- J.P. MORGAN INC. JULLE	-Janus OVERSERS FTD	- Janus Fors F	ST - HENDERSON FOCUS FD	1st Bank of	Examples:	SP. SP Mega Corp. Stock	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 (CC), or is jointly held with your spouse (ut), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	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-	BLOCK A
×			*	X			Indefinite	X	None	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."	вгоск в
						X	Royalties	×	NONE DIVIDENTIS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Check all columns that apply. 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. 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.	BLOCK C
*				7	7	*	X X X		None	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) pians or IRAs), you may check the "None" column. For all other assets, indicate the category of income box below 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.	BLOCK D
7	7	イ	25	PS	0			S (partial)	If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	BLOCK E

of income with a fair market value exceeding \$1,000 at more than \$200 in "unearned" income during the year. the end of the reporting period, and (b) any other reportable asset or sources of income which generated Identify (a) each asset held for investment or production Asset and/or Income Source BLOCK A method other than fair market value, please specify the method used. reporting year. If you use a valuation indicate value of asset at close of Value of Asset BLOCK B that generate tax-deferred income retirement accounts that do not allow Check all columns that apply. you to choose specific investments <u>or</u> Type of Income BLOCK C Ų. as 401(k) plans or IRAs), you may check that generate tax-deferred income (such you to choose specific investments For retirement accounts that do not allow Amount of Income BLOCK D Q Transaction purchases (P) asset had Indicate if the

generated income, the value should be year and is included only because it If an asset was sold during the reporting

if the asset generated no income durdisclosed as income. Check "None" gains, even if reinvested, must be Dividends, interest, and capital may check the "None" column. (such as 401(k) plans or IRAs), you

ing the reporting period.

even if reinvested, must be disclosed Dividends, interest, and capital gains, checking the appropriate box below. indicate the category of income by was earned or generated. as income. Check "None" if no income the "None" column. For all other assets, \$1,000 in exceeding exchanges (E) sales (S), or reporting year

***** \$1,001 - \$2,500 \$5,001 -\$15,000 ----≦ \$15,001 - \$50,000 : 6€ . \$50.001 - \$100.000 × \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 × Over \$5,000,000 portion of an If only a asset is sold, example. See below for as follows: please indicate (S) (partial) πул

EXCEPTED/BUND TRUST Other Type of Income (Specify: e.g., Partnership Income or Farm Income None

\$50,000,000

CAPITAL GAINS

\$1 - \$200 \$201 - \$1,000

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RENT INTEREST

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Royalties

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\$15,001 - \$50,000

\$50,001 - \$100,000

None \$1-\$1,000 \$1,001 - \$15,000

ŞP Mega Corp. Stock

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

If you so choose, you may indicate that an asset or

accounts; and any financial interest in, or income derived ing \$5,000 or less in a personal checking or saving ncome during the reporting period); any deposits totalnomes and vacation homes (unless there was renta

rom, a federal retirement program, including the

For rental or other real property held for investment, pro-vide a complete address.

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the name of the institution holding the account and its

nent accounts which are not self-directed, provide only account that exceeds the reporting thresholds. For retirerivestments), provide the value for each asset held in the

that is not publicly traded, state the name of the busi-For an ownership interest in a privately-held business

ness, the nature of its activities, and its geographic loca-

Exclude: Your personal residence, including second

tion in Block A

plans) that are self-directed (*i.e.*, plans in which you have the power, even if not exercised, to select the specific

"None."

For all IRAs and other retirement plans (such as 401(k)

the power, even if not exercised,

Provide complete names of stocks and mutual funds (do

not use ticker symbols.)

Examples: PAREGON BATHE YOUR ころのないないたら ROYCE VALLE FD Simon & Schuster 1st Bank of Paducah, KY Accounts 3 ところかのはってい S

For additional assets and unearned income, use next page

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Page & of U.

BLOCK E

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ĝ **9**2 please refer to the instruction booklet. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent that is not publicly traded, state the name of the busi-For rental or other real property held for investment, pro-vide a complete address. the power, even if not exercised, to select the specific not use ticker symbols.) more than \$200 in "unearned" income during the year. the end of the reporting period, and (b) any other reportable asset or sources of income which generated of Income with a fair market value exceeding \$1,000 at For a detailed discussion of Schedule III requirements optional column on the far left. child (DC), or is jointly held with your spouse (JT), in the income during the reporting period); any deposits total-ing \$5,000 or less in a personal checking or saving tion in Block A. For an ownership interest in a privately-held business For all IRAs and other retirement plans (such as 401(k) Provide complete names of stocks and mutual funds (do identify (a) each asset held for investment or production Exclude: Your personal residence, including second ness, the nature of its activities, and its geographic locavalue at the end of the reporting period. the name of the institution holding the account and its ment accounts which are not self-directed, provide only nvestments), provide the value for each asset held in the plans) that are self-directed (i.e., plans in which you have rom, a federal retirement program, including the Thrift accounts; and any financial interest in, or income derived account that exceeds the reporting thresholds. For retireiomes and vacation homes (unless there was Examples: とろろう Asset and/or Income Source 50 54A TO THE COMPANY STOCK DAMES LABORD SP Mega Corp. Stock Simon & Schuster Š 1st Bank of Paducah, KY Accounts DA JAS S **BLOCK A** 107 1488A エング X CX 25 > None generated income, the value should be method other than fair market value, reporting year. If you use a valuation please specify the method used. Indicate value of asset at close of None. year and is included only because it If an asset was sold during the reporting \$1-\$1,000 . 00 Indefinite O \$1,001 -- \$15,000 u. \$15,001 = \$50,000 Value of Asset m \$50,001 - \$100,000 BLOCK B 76 G \$250,001 - \$500,000 500,001=\$1:000,000 \$1,000,001 - \$5,000,000 × \$25,000,001 - \$50,000,000 Civer \$50,000,000 NONE if the asset generated no income durgains, even if reinvested, must be Dividends, interest, and capital ing the reporting period. disclosed as Income. Check "None" may check the "None" column. (such as 401(k) plans or IRAs), you that generate tax-deferred income you to choose specific investments or retirement accounts that do not allow Check all columns that apply. For DIVIDENDS RENT Type of Income INTEREST BLOCK C **CAPITAL GAINS** EXCEPTED/BUIND TRUST Royalties Other Type of Income (Specify: e.g., Partnership Income or Farm Income) checking the appropriate box below. indicate the category of income by the "None" column. For all other assets, as 401(k) plans or IRAs), you may check that generate tax-deferred income (such For retirement accounts that do not allow you to choose specific investments or None was earned or generated. as income. Check "None" if no income even if reinvested, must be disclosed Dividends, interest, and capital gains \$1 - \$200 ≡ \$201 - \$1,000 Amount of Income ₹. < BLOCK D \$2,501 - \$5,000 **£** ≦ \$15,001 - \$50,000 \$50,001 - \$100,000 × ⋝ \$100,001 - \$1,000,000 ж. \$1,000,001 - \$5,000,000 × Over \$5,000,000 \$1,000 in purchases (P) asset is sold, portion of ar If only a exceeding exchanges (E) sales (S), or asset had Indicate if the Transaction example. See below for as follows: reporting year. please indicate S (partial) BLOCK E (S) (partial) < J J J m or to

United States House of Representatives Financial Disclosure Statement for Calendar Year 2010

Jeannette H. Schmidt

Listing of real estate assets held by various family partnerships and jointly with siblings. Jean Schmidt owns 25% of all of the partnerships listed below.

(1) OT Realty Enterprises LLC

Percentage owned: 25%

Corner of Loveland Miamiville Rd & Branch Hill / Guinea Pike, Loveland, OH 45140

Land leased to Walgreen Pharmacy

Value of percentage owned - \$250,000 - \$500,000

Net Income for percentage owned for 2010 - \$15,000 - \$50,000 (rent)

(2) OT Realty Enterprises LLC II

Percentage owned: 25%

Corner of Loveland Miamiville Rd & Branch Hill / Guinea Pike, Loveland, OH 45140

Land leased to Kroger

Value of percentage owned - \$250,000 - \$500,000

Net Income for percentage owned for 2010 - \$15,000 - \$50,000 (rent)

(3) OT Realty Enterprises LLC III

Percentage owned: 25%

Corner of Loveland Miamiville Rd & Branch Hill / Guinea Pike, Loveland, OH 45140

Land to be developed in the future

Value of percentage owned - \$50,000 - \$100,000

Net Income for percentage owned for 2010 – zero

(4) Jennifer Black Et All

Percentage owned: 25%

Corner of Loveland Miamiville Rd & Branch Hill / Guinea Pike, Loveland, OH 45140

Land adjacent to OT Realty Enterprises LLC II

Value of percentage owned - \$50,000 - \$100,000

Net Income for percentage owned for 2010 - \$1,000 - \$2,500 (rent)

(5) Gus Hoffman Second Family Limited Partnership

Percentage owned: 25%

Corner of Loveland Miamiville Rd & Branch Hill / Guinea Pike, Loveland, OH 45140

Farm Land

Value of percentage owned - \$500,000 - \$1,000,000

Net Income for percentage owned for 2010 - \$2,500 - \$5,000 (farm crops)

(6) RTJJ LLC

Percentage owned: 25%

Corner of Loveland Miamiville Rd & Branch Hill / Guinea Pike, Loveland, OH 45140

Farm Land

Value of percentage owned - \$1,000,000 - \$5,000,000

Net Income for percentage owned for 2010 - \$2,500 - \$5,000 (farm crops)

(7) RTJJ LLC

Percentage owned: 25%

Moore Rd. & Bantam Rd., Clermont County OH

Vacant property

Value of percentage owned - \$50,000 - \$100,000

Net income for percentage owned for 2010 – zero

(8) RTJJ LLC

Percentage owned: 25%

1232 SR 28, Milford, OH 45150

Commercial Rental Property

Value of percentage owned - \$50,000 - \$100,000

Net Income for percentage owned for 2010 - \$2,500 - \$5,000 (rent)

(9) RTJJ LLC

Percentage owned: 25%

1236 SR 28, Milford, OH 45150 (SR 28 & Floyd Place)

Residential Rental Property (3 small homes & vacant lots)

Value of percentage owned - \$100,000 - \$250,000

Net Income for percentage owned for 2010 - \$2,500 - \$5,000

(10)RTJJ LLC

Percentage owned: 25%

SR 132 & Judd Rd.

Vacant Land

Value of percentage owned: \$15,000 - \$50,000 Net Income for percentage owned for 2010 - zero

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 transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is soid, please so Indicate (i.e., "partial sale"). See example below. 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. P. DC, JT Asset Example: Mega Corporation Common Stock (partial sale)	PURCHASE Of Transaction SALE EXCHANGE	Exchange of	Check Box if Capital Gain Exceeded \$200	Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	\$1,001 \$15,000 \$15,001-	\$50,000	\$100,000 P P P P P P P P P P P P P P P P P	\$250,001- \$500,000 m Q	\$500,001- \$1,000,000 T	\$1,000,001- 6 2 \$5,000,000 6 2	\$5,000,001- \$25,000,000 ± \$25,000,001-	\$50,000,000 Over
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Name BER JEAN SCHMIDT

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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	of Tra	Type of Transaction	ti on		Date	•		Am	Amount of	t of 7	rans	Transaction	Sn .		
resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent chilacotion.				apital 1 \$200	(MO/DAY/YR)	A	Φ.	ဂ	0	m	π	ଦ	I	_	د.
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.	HASE		ANGE	Box if Cocedeo	or Quarterly, Monthly, or										,000
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.	PURC	SALE	EXCH	Check E Gain Ex	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,00° \$250,000	\$250,00° \$500,000	\$500,00 \$1,000,0	\$1,000,0 \$5,000,0	\$5,000,0 \$25,000,	\$25,000, \$50,000,	Over \$50,000,
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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	of Transaction	iype ansaci	tion		Date			Am	Amount of	of T	rans	Transaction	5		
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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.	PURC	SALE	EXCH	Check I Gain E	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001 \$50,000	\$50,001 \$100,00	\$100,00 \$250,00	\$250,00 \$500,00	\$500,00 \$1,000,0	\$1,000,0 \$5,000,0	\$5,000,0 \$25,000	\$25,000 \$50,000	Over \$50,000
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SP Example: Mega Corporation Common Stock (partial sale)		×			10-12-10		×								
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1 HENDERSON ENZOPTION FOCUS	×				01-05-b	X							<u> </u>		
- HENDERSON EUROPEAN FECUS	*				10-6-10	X									
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- FRONKLIN NATURAL RESOURCE TUND	4.				12-3-10		×								
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. 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 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 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

spouse or dependent child that is totally independent of his or her relationship to you. 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

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 <u>not</u> at sponsor's expense
	Mar. 2	DC—Chicago—DC	z	z	Z	None
Examples: Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Υ	Υ	2 Days
FROMEUN CITE FOR GLOBBL BLOY EX)						
	11675 11-12	1STANBUL - ANKHA	イ	_(<i>ح</i> ر	てのだけ
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SCHEDULE VIII—POSITIONS

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

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

Position	Name of Organization
PARZINESS	RITS LLC (FRAILY PARTNERSHIP)
THETWEE	OT REALTY ENGRPHISES I II TIT (FRANCI PARTNERS that)
COIZT NAZ	FALLER

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

2 d		
Date	Parties To	Terms of Agreement