MEMBER/OFFICER/EMPLOYEE FINANCIAL DISCLOSURE EXTENSION REQUEST FORM

Name of Requestor: Blake Farenthold	Date: May 9, 2017
Please type or print legibly	5 2 5
Employing Member/Committee/Office: Blake Farentho	old
Financial Disclosure Statement Type (check one):	Employee Termination
The length of time for which extension is requested (chec	ck one):
30 days 60 days 90 days Other	8
30 days 60 days 90 days Other	Specify number of days or specific date
For Ethics Committee Use Only	
Days granted:	
(If days granted differ from days requested) Reason: Total days requested exceeds 90.	
Your request for an extension of time in which to file the Financial Disclosure Statement (FD) referenced above is hereby granted. Your FD must be filed on or before 8(13(17)). The Ethics Committee may grant additional requests, which may not, in the aggregate, exceed 90 days from the original due date. Please note that if the date listed in this paragraph is on a weekend and you intend to file using the paper form, your FD must be received by the Clerk of the House no later than close of business on the last business day before this date or postmarked on or before that date.	
Date: 5/24/17	t report
Date: 5/24/17	Alexander Dental
Susan W. Brooks, Chairwoman T	heodore E. Deutch, Ranking Member

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(This page will be publicly disclosed)