₹	Yes	pendent child	liabilities of a spouse or dependent child the Committee on Ethics.		arned" income ss you have fir	er assets, "une wer "yes" unle	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with
N N	8 8	ot be	endent child?	s and certain other "exuspouse, or a dependen	nittee on Ethic ting you, your	d by the Comr	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 benefiting you, your spouse, or a dependent child?
ร	QUESTION)F THESE	ANSWER EACH OF THESE QUESTIONS	1	TINFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	response.	each "Yes"	hedule attached for each "Yes" response	ppropriate schedu	and the a	e answered	Each question in this part must be answered and the appropriate sc
	¥ 98	\$5,000 from	e compensation of more than \$5,000 from the two prior years? and attach Schedule VI.	VI. Did you receive compensation of more a single source in the two prior years? If yes, complete and attach Schedule VI.	₹	68 □	III. 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 III.
₹	ĕ	angement	ny reportable agreement or arrangement tity? Ind attach Schedule V.	V. Did you have any reportable agreemen with an outside entity? If yee, complete and attach Schedule V.	<u>\$</u>	∑	II. 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 II.
<u>\$</u>	Yes ∑	efore the date ir two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	IV. Did you hold any rep of filing in the current cal if yes, complete and at	S _S	¥ 98	 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	ANSWER EACH OF THESE	PRELIMINARY INFORMATION - ANSWI
							in all sections, please type or print clearly in blue or black ink.
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Page 1 of 45	AUG 1 4 2012	AUG	ORM B ates and new employees	FORM B	7	ATIVES	FINANCIAL DISCLOSURE STATEMENT Period covered: Japuary 1 2012 - 124 31, 201
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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

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Page 2_ of 45

47	exceeding \$1,000. See examples below.	ist o	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

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

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NAME: BRAD SCHNEIDER

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NAME: BRAD SCHNEIDER

SCHEDULE II - ASSETS AND "UNEARNED" INCOME

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NAME: BRAD SCHNEIDER

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SCHEDULE II - ASSETS AND "UNEARNED" INCOME

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SCHEDULE III — LIABILITIES

Name BRAS SCHWELDER

Page 43 of 45

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); 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 sib-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 ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

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	Creditor	Example: First Bank of Wilmington, DE	28				
79	Liability Incurred mo/year	May 1998					
	Type of Liability	Mortgage on 123 Main Street, Dover, DE					
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SCHEDULE IV -- POSITIONS

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

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 a political party or campaign organization);

Position	Name of Organization
MANAGING MEMBER	CAOSNICE CONSULTING GROUP LLC
MANAGING MEMBEL	LENO-OUT CAPITAL PARTHURS, LLC
MANAGING MEMPER	(RAD-OUT THIRD SUCUTIONS INVESTIGENT FRETNERSHIP, LLC
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VP DIRECTOR	BRANDON DANN RUTETE, N MERUDIA FUNDATION

SCHEDULE III — LIABILITIES

Name Bears SCHNELIOLA

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owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); toans secured by automobiles, household furni-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 ture, 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 (l.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

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	Creditor	Example: First Bank of Wilmington, DE				
Date	Liability Incurred mo/year	May 1998				
	Type of Liability	Mortgage on 123 Main Street, Dover, DE				
	\$10,001— \$15,000					
+1	\$15,001— \$50,000 U					-
+1	\$100,000 C \$100,001— \$250,000					-
mount	\$250,000 \$250,001— \$500,000	1				ŀ
Amount of Liability	\$500,001— \$1,000,000	1				
·]	\$1,000,0001 ຄ \$5,000,000	_				
	\$5,000,001— \$25,000,000 ± \$25,000,001—_	_!				 -
	\$50,000,000 Over	- ;		_		-
	\$50,000,000	٤				

SCHEDULE IV — POSITIONS

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

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 a political party or campaign organization);

Position	Name of Organization
TREASURAL	ALLIANCE of LATINGS AND DEWS
DIERCTOR	ARERICAN USENICH COMMITTER (HICKSO RECINA)
CHAIR	ARRECCAL JEUNT COLUMNIE INTE FOTHIC/ INTERFAMIL GENESSIN
VICE CHAIR	÷
Vice CHAP, DIRECTOR	VICE CHAP , DIRECTOR PANIM: THE INSTITUTE for JEWISH LEADERSHIP AND VALUES

Use additional sheets if more space is required.

SCHEDULE V - AGREEMENTS

	Name
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ス	Date	Parties To	Terms of Agreement

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

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

Source (Nam	Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	etown, Homestate	Accounting services
Alfred G. Goldstein (h.cox) 14		Advisory fas, Project the for Overice Concer
222		