PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	esponse.	appropriate schedule attached for each "Yes" response.	and the	e answerec	Each question in this part must be answered and the appropriate schedu
N _O	Yes 🗌	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	<u>8</u> □	Yes X	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.
No No	Yes 🔲	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.		Yes X	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.
Š	Yes X	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.	N _S	Yes X	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.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

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 benefiting you, your spouse, or a dependent child?

Yes

s X

Yes

<u>₹</u>

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

	Name
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	Page J
	Page A of 6

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 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.

						John Malan Sha District	Drove Mairers tu	DA House of Bepresentatives	Harris County, Texas Public Schools	Examples: XYZ Trade Association, Chicago, IL (Rec'd December 2)	_	XVZ Corporation Houston TX	Source (include date of receipt for honoraria)	
					6	Spanse Salary	Salary	Salacu	Spouse Salary	Honorarium	Director's Fee	Salarv	Туре	
) , ,	726 724	D	*28, 126	NA	0	\$400	\$6.300	Current Year to Filing	Amount
						173 177	24 DOD	162 174	NA	\$1,000	\$3,200	\$28.450	Preceding Year	vint

Page 3 of 6

DT 459 285 8, Phila, PA	JT/19 E 11th St, Com Col 10	772750 P. Lecs R.J. Mars JAPA	Dr 602 Am St Phila PA	SP IRA-Fidelity	IRA-Fidely	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP SP Mega Corp. Stock	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 personal checking or savings 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 (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule II 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). 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 retirement accounts which are not self-directed provide only the name of the institution holding the
X	><	~	×	×	×	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$500,001 - \$1,000,000 \$500,001 - \$5,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$0 \$25,000,001 - \$50,000,000	BLOCK B 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."
X	X	× .	X	×	***	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deterred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" 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.
У	×	~ ~	X				X	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 None \$1 - \$200 \$201 - \$1,000 \$1 - \$2,500 \$201 - \$1,000 \$201 - \$1,000 \$201 - \$1,000 \$201 - \$1,000 \$31,000,000 \$31,000,000 \$31,000,000 \$31,000,000 \$31,000,000 \$31,000,000 \$31,000 - \$2,500 \$31,001 - \$2,500 \$31,001 - \$2,500 \$31,001 - \$2,500 \$31,001 - \$2,500 \$315,001 - \$100,000 \$3100,001 - \$1,000,000 \$31,000,001 - \$1,000,000 \$31,000,001 - \$5,000,000 \$31,000,001 - \$5,000,000 \$31,000,001 - \$5,000,000 \$31,000,001 - \$5,000,000 \$31,000,001 - \$5,000,000 \$31,000,001 - \$5,000,000 \$31,000,001 - \$5,000,000 \$31,000,001 - \$5,000,000	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by 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.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

SCHEDULE II — ASSETS AND "UI Continuation Sheet (if needed)

onunidation Sheet (in needed)				
BLOCK A	вгоск в	BLOCK C	вьоск в	X D
Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income	f Income
	A B C D E F G H I J K L	Ð	Current Year	Preceding
	00 ,000 0,000	•		XI III V IV V IV IV IV
	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$5,000,00 \$1,000,001 - \$5,000,00 \$5,000,001 - \$5,000,00 \$25,000,001 - \$50,000 \$25,000,000 - \$50,000	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TO TAX-DEFERRED Other Type of Income (Specify: e.g., Partnershi or Farm Income)	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 Over \$5,000,000	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000
Exposs Buchwood Philass	X	X	Х	X
M3) Colonia St. Philapa	*	×	×	×
6309 Lambert St. Phile 194	*	×	×	×
452 Me St Mile 1941	×	×	×	×
COOD Ocontas Philo PA	X	×	><	×
456 15th st Phil PA	X	Х	X	
5631 Crowson St. Phile PA	X	X	 X 	×
256 Martan St. Ohik B	X	X	×	×
409 Fearly 11 RN Bite PA	×	×	×	×

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Name Brendan F. Boyle

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owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income), loans 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 (i.e., credit cards)* only if the balance at the close of the previous calendar year exceeded \$10,000.

SCHE	10	77		17	J7	71		DC,)	
SCHEDULE IV — POSITIONS	Ocean City Home Bank	Chase Band	Rept of Education	Wells Face	Chase Bank	Beneficial Bank	Example: First Bank of Wilmington, DE	Creditor		
	Mur 2007	Dec 2012	Seaf Jass	Seat-Jour	Du Lou	118C) 7[May 1998	Liability Incurred mo/year	Date	
	Mortgage	Codit and	Student loan	Mickey on hyltiple place	ر ق	Michael on Multiple poor	Mortgage on 123 Main Street, Dover, DE	Type of Liability		
								\$15,000	<u> </u>	
			×'	×				\$50,000		
	×						X	\$100.001	-	Amo
					×	X		\$500,000	Π	Amount of Liability
								\$1,000,000	-	Liabil
								\$5,000,000 \$5,000,001—	9	ty
								\$25,000,000 = \$25,000,001— \$50,000,000	_	
								Over \$50,000,000		

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);

	ally positions solely of all horiotally hatties	ROIG.
	Position	Name of Organization
	Spard Member	Legacy Vonth Tennis Philadelphia PA
	-	_
_	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	

SCHEDULE V — AGREEMENTS

Name Brendan F. Bayle Page b of b

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 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	
			Terms of Agreement	

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

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. 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

			Example: Doe Jones & Smith, Hometown, Homestate	Source (Name and Address)
			Accounting services	Brief Description of Duties

GPO: 2012

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