## PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

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the onse.	wered and Yes" respo	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	S □	Yes No	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.
× X	Yes	IX. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IX.	N <sub>o</sub>	Yes	<ol> <li>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?</li> <li>If yes, complete and attach Schedule IV.</li> </ol>
Š	Yes	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.	No	Yes	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.
× X	Yes	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 <sub>o</sub>	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.
<b>₹</b>	Yes	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.	N <sub>o</sub>	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.

# EXCLUSION OF SPOUSE, DEPENDENT, OR THUST INFORMATION — ANSWER FACE OF THESE WUESTIONS

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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 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. Examples: Unum disability Insurance Judoolward & Medowell Civil War Roundtable (Oct. 2nd) State of Maryland Ontario County Board of Education Keene State Source Spouse denotiv Legislative Pension Spouse Salary Spouse Speech Approved Teaching Fee Type \$1,000 Amount 1 \$9,000 \$6,000 ξ

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## SCHEDULE II -- PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb. 2, 2009	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2009	\$500
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None -			

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67.00	ios mie	Charco	Tree T	Crassic System	charl.		Examples:	SP	provide the value and income each esset in the account tha reporting threshold. For retiremen not self-directed, name the institut account and its value at the end of the self-directed, state the name of the business that traded, state the name of the business that the traded information to be self-dependent of the savings accounts to the same traded in the savings accounts that the savings accounts the savings accounts that the savings accounts the savings accounts that the savings accounts that the savings accounts that the savings accounts the savings accounts that the savings accounts th	Asset and antify (a) each assection of income ceeding \$1,000 a and (b) any oth ich generated m owne during the ich grovide a co mes of stocks a ker symbols). For ans (such as 401 ans (such as 401
Agrinas Cong.	: Amaissance	o fur	ent Conde:	can Funds: Class B	Managed es Schwab	tst Bank of Paducah, KY Accounts	Simon & Schuster	Mega Corp. Stock	provide the value and income information on each esset in the account that exceeds the each esset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.  Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; and any financial interest in or income derived from U.S. Government retirement programs.  Government retirement programs.	
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							Hoyalles		Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Type of income  Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets including all IRAs, inclicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.
						Τ	-		None –	우 오 <b>중 모</b> 수 함 경 및 공
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		Sale						o (paruar)	If only a portion of an passet is sold, asset is sold, please indicate as follows: (S) (partial) See below for example.  P, S, E	BLOCK E  Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

#### SCHEDULE IV- TRANSACTIONS

Name George A. Racknowick Page 6 of 9

	Type of Transaction	Type ansac	tion	al )O	Date			Am	Amount of		Tan	Transaction	<u> </u>	<b>i</b>	
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 sold, please so indicate (i.e., "partial sale"). See example below.	-JASE		NGE	lox if Capital ceeded \$200	(MO/DAY/YR) or Quarterly,	Ø	n	•			ល	01- 00 ≖	)1- )000 —	<b>101.</b>	
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 Ex	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
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#### SCHEDULE V- LIABILITIES

Name George A. Raobnovich

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 owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; 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 preceding calendar year exceeded \$10,000.

							Атоп	nt of I	Amount of Liability		
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4 C X		Creditor	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001 \$100,000	\$100,001- \$250,000 \$250,001-	\$500,000 \$500,001-	\$1,000,000 \$1,000,001 \$5,000,000	\$5,000,000 \$5,000,001 \$25,000,000	\$25,000,00 \$50,000,00 Over
	Example:	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.			10 m 10 m 10 m 10 m	×			187	10 mg/m/
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#### SCHEDULE VI - GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

	Source	Description	Value
_	Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345
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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

a 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

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Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Member Included? (Y/N)	Number of days not at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Υ	Y	2 Days
None-						,
					i	

#### SCHEDULE VIII—POSITIONS

Name George ! La danovich

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

zations); 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 political parties and campaign organi-

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#### SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer; or publication of a book. 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; continuing participation in an

Date	Parties To	Terms of Agreement
	None-	