MEMBER/OFFICER/EMPLOYEE FINANCIAL DISCLOSURE EXTENSION REQUEST FORM

Name of Requestor: David P. Joyce	Date:	10/04/2017	
Please type or print legibly			
Employing Member/Committee/Office: OH14	•		
Financial Disclosure Statement Type (check one): Annual (CY 2016) Amendment The length of time for which extension is requested	(check one):	Termination	MA EI ADVIDE
30 days 60 days 90 days Oth	10/13/2017 ner		man and a second
	Specify number of	f days or specific date	S S
For Ethics Committee Use Only			3 3
Days granted:			-
(If days granted differ from days requested) Reason: Total days requested exceeds 96	0.	•	
Your request for an extension of time in which to referenced above is hereby granted. Your FD mu Ethics Committee may grant additional requests, days from the original due date. Please note that weekend and you intend to file using the paper for the House no later than close of business on the last on or before that date. Date: 11-9-17	st be filed on or l which may not, in that if the date liste the your FD must	before 10/13/ in the aggregate, ed in this paragrap be received by the	The exceed 90 th is on a clerk of
Susan W. Brooks, Chairwoman	Theodore E. D	Deutch, Ranking Mo	ember

Copy to: Legislative Resource Center, 135 CHOB

(This page will be publicly disclosed)