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This Report Should Be Filed With:

Secretary of the Senate Office of Public Records Hart Building, Suite 232 Washington, DC 20510

PERIODIC L OF FINANCIAL **TRANSACTIONS**

Washington, DC 20510 (Time/C											ne/Dat	e) 				
Reporting Individual's Name	Senate Office / Agency in Which Employed												Page Number			
Burr, Richard M.													<u> </u>	1		
Report any purchase, sale, or exchange					Amount of Transaction (x)											
by you, your spouse, or dependent child within 30 days of receiving written notification of such transaction. Report any stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving an excepted investment fund, any real property, or a transaction between you, your spouse, or dependent child. Please clarify which two assets are involved in any reportable exchange. In no event may this disclosure be filed more than 45 days after such transaction. Identification of Assets		nsact ype (:		-	\$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	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000			
		Sale	Exchange	Transaction Date (Mo., Day, Yr.)										\$25,000,001 - \$50,000,000	Over \$50,000,000	
Example: (S) Spouse IBM Corp. (stock) NYSE	×			2/1/1X		Х		_	Ε	х	Α	М	Р	L	Ε	
(DC) Dependent Child (J) Joint (DC) Microsoft (stock) NASDAQ/OTC		X		2/27/1X				х	E	х	A	М	Р	L	E	
1 Home Depot Inc. (stock) NYSE		X		8/30/12	X				·							
2 (S) Home Depot Inc. (stock) NYSE		X		8/30/12		X										
3																
4									<u>.</u>						<u> </u>	
5		ļ <u>.</u>			_		_							_		
6	<u> </u>								<u> </u>						<u> </u>	
7				·····							_					
8																
This Periodic Disclosure Of Financial Transactivity will be made available by the Office of the Se Select Committee on Ethics. Any individual subject to civil and criminal sanctions. (See 5	cretar who I	y of the knowin	e Sen gly ar	ate to any request nd willfully falsifies	ing pe , or w	erson Mokr	upon '	writter	n appl	icatior	n and	will be	e revie	ewed I	by the	
		Signature of Reporting Individual									Date (Month, Day, Year)					
on this form and all attached schedules are the complete and correct to the best of my knowledge and belief.								9/11/12								
It is the opinion of the reviewer that the Signature of Reviewing Official For Official Use Only - Do Not Write Below This Line Signature of Reviewing Official									Date (Month, Day, Year)							
statements made in this form are in compliance with Title I of the Ethics in Government Act.																

SECRETARY

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