MARK L. PRYOR, ARKANDAS SHERROD BROWN, OHIO JOHN C. GAUGAMAN, CHIEF COUNSEL AND STAFF DIRECTOR ANNETTE GILLIS, DEPUTY STAFF DIRECTOR BARBARA BOXER, CALIFORNIA, CHARRAIN CHNIN ISAKSON, GEORGIA, VICE CHAIRMAN PAT ROBERTS, KANSAD JAMES E. RIBCH, EDAHO

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January <u>10</u>, 2014

Mr. Benjamin E. Sasse

Dear Mr.

The Select Committee on Ethics is required by section 106 of the Ethics in Government Act of 1978, as amended, to review public financial disclosure reports in order to determine whether they are in compliance with applicable laws and regulations.

Enclosed you will find a request for some additional, clarifying information regarding your candidate disclosure report. Please make the requested modifications on the enclosed page(s) from your public disclosure report, sign and date each change, and return the modifications to the Secretary of the Senate, Office of Public Records, Room 232 Hart Senate Office Building, United States Senate, Washington D.C. 20510. Please be advised that responses to requested information will be made available to the public.

If applicable, please return any Confidential Disclosure of Payments to Charitable Organizations in Lieu of Honoraria or Confidential Disclosure of Candidates Home Address the Select Committee on Ethics at Room 220 of the Hart Senate Office Building. pages to

this letter If you believe you have received this request in error, please contact the Select Committee Ethics immediately. Responses to this request must be received within 30 days from the above da Please contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee, at (202) 224-2981, if you have any questions about the contact Adam Kamp with the Committee at (202) 224-2981. any questions about

Thank you for your attention regarding this matter.

John C. Sassaman Chief Counsel and Staff Director

JCS/ack

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Mr. Benjamin Sasse: January 10, 2014

The following Part(s) may require additional information on your disclosure report. Please refer to the items under each Part for the specific information that is being requested.

PART IIIB. NON PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

()Please state the nature of business of the asset (Block A): Page 12, Lines 1 and 2; Calico Holdings and Jackson Hole Living, LLC.

()Address (city, state) of asset/source of income omitted (Block A): Page 12, Lines 1 and 2; Calico Holdings and Jackson Hole Living, LLC. Calico

PART X. COMPENSATION IN EXCESS OF \$5,000 FROM ONE SOURCE (V)Brief description of duties omitted: Please provide additional detail bey Line 8: Catrish Ventures/Silverstream additional detail beyond "fees": Page 16,

()Brief description of duties omitted: Please provide Lines 13 and 14: Midland University additional detail beyond "Salary": Page 17,

Please return your clarifications or additional information to the Senate, Office of Public Records, 232 Hart Senate Office Building, V 20510. Secretary of the Washington, D.C.

BLOCK B Identity of Non-Publicly Traded Assets and Unearned Income Sources Report the name, address (city, state and description) of each interest held by you, your spouse, or your dependent chief (See p.S., CONTENTS or REPORTS Part B of Instructions) for the production of income or investment in a non-public trade or business which: (1) had a value exceeding \$1,000 at the observed over \$200 in Treatment (2) generated over \$200 in Treatment (3) generated (3) g	Reporting Individual's Name	P	AR	T 11	IIB.	. N	10	N-F	זטי	BL	ICL	Υ	TR	ίΑ	DE	ĒD	A :	<u></u>	ET	s/	-NI	ט ט	NEARI	NE	D!	NC	ON	ΛE	sc)UF	₹CE	 ES		Pa	age Number
Report the name, address (city, state and description) of each interest held by you, your spouse, or your dependent child (See p.S., CONTENTS OF REPORTS Part B of instructions) for the production of income or investment in a non-public grade or business which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in 'unearmed' income during the reporting period; and/or lined the trade or business. Publicly traded assets held by non-public entity may be instead on Part IIIA. Example: DC, Merch the first column. Type of income Amount of Income Amount of Income Actual Amount of Income Occurrence during the reporting period; and/or each underlying asset, which is not incidental to the trade or business. Publicly traded assets held by non-public entity may be instead on Part IIIA. Example: DC, Merch the first column. Type of income Amount of Income Amount of Income Amount of Income Amount of Income Actual Amount of Income Occurrence during the reporting period; Include the above report for each underlying asset, which is not incidental to the trade or business. Publicly traded assets held by non-public entity may be instead on Part IIIA. Example: DC, Merch the first column. Type of income Amount of Income Amount of Income Amount of Income Other (1025 March 1000 000 000 000 000 000 000 000 000 0	Identity of Non-Publicly Traded Assets and Unearned Income Sources		Valuation of Assets At the close of reporting period. Type and Amount of Income										_	·																					
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Reporting Individual's Name		
	PART X. COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE	Page Number
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FIRST TIME FILERS ONLY: (Except Candidate Reports - All Candidate Reports Must Include Part X If Applicable)

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any non-profit organization when you directly government as a source.

Name of Source			Address of Source	· Brief Description of Duties						
Ex	aniblo:	Jones & Smith	Hometown, TX	Legal Services EXAMPLE						
		Metro University (client of Janes & Smith	Moneylown, USA	Legal Services in connection with university construction EXAMPLE						
1	Heallhc	are Coalition of Texas	San Antonio, TX	Strategy/Speech						
2	Healthc	are Coalition of Texas	Austin, TX	Strategy/Speech						
3	Health (Care Service Corporation	Chicago, IL	Strategy						
4	Hudson	Valey HFMA	Tarrytown, NY	Strategy/Speech						
5	Indiana	Hospital Association '	Indianapolis, IN	Strategy/Speech						
6	Integris	Health, Inc.	Phoenix, AZ	Strategy/Speech						
7	Kentuck	ky Hospital Association	Louisville, KY	Strategy/Speech						
8	Lincoln	Healthcare	Orlando, FL	Strategy/Speech						
		Healthcare	Washington, DC	Debate						
10	Maine H	lospital Association	Rockport, ME	Strategy/Speech						
11	Medass	els	Las Vegas, NV	Strategy/Speech						
12	Memoria	al Hermann Healthcare System	Houston, TX	Strategy/Speech						
1.3	Midland	University	Fremont, NE	Salary-2012 President -> Bey 2/5/2014,						
14	Midland	University	Fremont, NE	Salary-2013 PresidentBer 2/2014.						
15	Minneso	ola Hospital Association	Brainord, MN	Strategy/Speech						

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FIRST TIME FILERS ONLY: (Except Candidate Reports - All Candidate Reports Must Include Part V is Amount of the SOURCE	16

FIRST TIME FILERS ONLY: (Except Candidate Reports - All Candidate Reports Must Include Part X if Applicable)

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any non-profit organization when you directly provided the services to the clients and/or customers of the firm that generated a fee or payment of more than \$5,000. You need not report the U.S.

	Name of Source		Address of Source	Briof Description of Duties						
E	:xample:	Jones & Smith	Hometown, TX	Prior Description of Duties						
····-		Matro University (client of Jones & Smith	Monaylown, USA	Logal Servicos	EXAMPLE					
1	Abbott I	.abs	Dallas, TX	Legal Services in connection with university construction	EXAMPLE					
2.	America	n Association of Blood Banks	Chicago, IL	Strategy/Speech						
- -	Arkansa	s Hospital Association		Debate	· · · · · · · · · · · · · · · · · · ·					
	<u> </u>		Phoenix, AZ	Strategy/Speech						
1	Baylor H	lealth	Grapevine, TX	Circle and Comment						
5	Baylor H	lealth	Dallas, TX	Strategy/Speech						
```	Baylor U	niversity Medical Center		Strategy/Speech						
	·		Frisco, TX	Strategy/Speech						
	ļ	Consulting Group	Dallas, TX	Strategy/Speech						
;	Catfish V	entures/Silverstream	San Diego, CA	Engelie Charles /						
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1	Fingertip	Formulary (formerly DBA Pinsonault)	Orlando, FL	Strategy/Speech	·					
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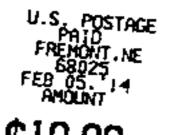
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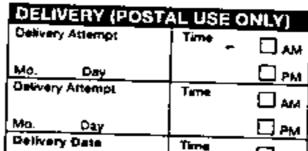
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