

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved
 OMB No. 3209-0001

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	Reporting Status (Check Appropriate Boxes) <input type="checkbox"/> Incumbent <input checked="" type="checkbox"/> New Entrant (Nominee or Candidate) <input checked="" type="checkbox"/> Termination Filer <input type="checkbox"/> Termination Date (If Applicable) (Month, Day, Year)	Calendar Year Covered by Report	Last Name: <u>Slutz</u> First Name and Middle Initial: <u>Pamela J.H.</u>	
Reporting Individual's Name	Title of Position: <u>Ambassador to Burundi</u>		Department or Agency (If Applicable): <u>Department of State</u>	
Position for Which Filing	Address (Number, Street, City, State, and ZIP Code): <u>American Embassy, Nairobi, Kenya</u>		Telephone No. (Include Area Code): <u>254-20-363-6057</u>	
Location of Present Office (or forwarding address)	Title of Position(s) and Date(s) Held: <u>Deputy Chief of Mission, Nairobi, Kenya (October 06 - Present)</u>			
Employer: Field with the Federal Government During the Preceding 12 Months (If Not Same as Above)	Name of Congressional Committee Considering Nomination: <u>Senate Foreign Relations Committee</u> Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Presidential Nominees Subject to Senate Confirmation	Certification: Signature of Reporting Individual: <u>Pamela J. Slutz</u> Date (Month, Day, Year): <u>April 24, 2009</u>			
Other Review (If desired by agency)	Signature of Other Reviewer: _____ Date (Month, Day, Year): _____			
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing Official: <u>James Thessin</u> Date (Month, Day, Year): <u>5/27/09</u>			
Office of Government Ethics Use Only	Signature: <u>Robert J. Cook</u> Date (Month, Day, Year): <u>6/17/09</u>			
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)				
(Check box if filing extension granted & indicate number of days: _____) <input type="checkbox"/>				
(Check box if comments are continued on the reverse side) <input type="checkbox"/>				
Agency Use Only				
OGE Use Only				
JUN 11 2009				

Fee for Late Filing
 Any individual who is required to file this report and does so more than 30 days after the date the report is required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period, shall be subject to a \$200 fee.

Reporting Periods
 Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.

Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable.

Nominees, New Entrants and Candidates for President and Vice President:

Schedule A—The reporting period for income (PART A) is the preceding calendar year and the current calendar year up to the date of filing. Value assets as of any date you choose that is within 31 days of the date of filing.

Schedule B Not applicable.

Schedule C, Part I (Liabilities)—The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date of filing.

Schedule C, Part II (Agreements or Arrangements)—Show any agreements or arrangements as of the date of filing.

Schedule D—The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.

Prior Editions Cannot Be Used.

Reporting Individual's Name

SCHEDULE A continued
 (Use only if needed)

Page Number

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Slutz, Pamela J. H.

Assets and Income

Valuation of Assets
 at close of reporting period.

Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.

BLOCK A

BLOCK B

BLOCK C

	None (or Less than \$1,001) \$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 \$25,000,001 - \$50,000,000 Over \$50,000,000 Excepted Investment Fund Excepted Trust Qualified Trust												Type		Amount												Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$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 \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
Vanguard Short-Term Bond Index Fund	X																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Reporting Individual's Name

SCHEDULE A continued
(Use only if needed)

Page Number

Slutz, Pamela J. H.

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P.05

254 20 363 6328

AMEMBASSY NAIROBI

09-DEC-2008 06:32

Assets and Income BLOCK A	Valuation of Assets at close of reporting period. BLOCK B											Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. BLOCK C																	Date (Mo., Day, Yr.) Only if Honoraria					
	None (or less than \$1,001)	\$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	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount										Other Income (Specify Type & Actual Amount)				
																Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$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 \$1,000,000*			\$1,000,001 - \$5,000,000	Over \$5,000,000		
Merck & Co. (MRK) Common Stock		X																			X													
Newell Rubbermaid (NWL) Common Stock		X																			X													
Pepsico (PEP) Common Stock		X																			X													
Walmart Stores (WMT) Common Stock				X																		X												
Yum Brands (YUM) Common Stock		X																			X													
Wyeth (sold)	X															X				X														
Heartland Value Fund			X										X					X				X												
Northeast Investors Trust Fund		X											X							X														
Seligman Communications & Information Class A Fund		X											X							X														

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Reporting Individual's Name

SCHEDULE A continued
 (Use only if needed)

Page Number

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Slutz, Pamela J. H.

Assets and Income

**Valuation of Assets
at close of reporting period.**

Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.

BLOCK A

BLOCK B

BLOCK C

	None (or Less than \$1,001)	\$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	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria	
																Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$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 \$1,000,000*	\$1,000,001 - \$5,000,000			Over \$5,000,000
American Insurance Group (AIG) Common Stock	X																			X												
Hewlett-Packard Group (HPQ) Common Stock		X																		X												
Vanguard Intermediate-Term Tax-Exempt Fund		X											X							X												
IRA: Janus Contrarian Fund (JSVAX)		X											X							X												
TR Price Health Sciences Fund		X											X								X											
TR Price Tax Free High Yield Fund		X											X								X											
TR Price Prime Reserve	X												X							X												
Amazon.com Common Stock		X														X					X											
Morgan Stanley Emerging Markets Debt Fund		X											X								X											

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P.06

254 20 363 6328

AMEMBASSY NAIROBI

09-DEC-2008 06:32

Reporting Individual's Name

SCHEDULE A continued
(Use only if needed)

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Slutz, Pamela J. H.

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Assets and Income

Valuation of Assets
at close of reporting period.

Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.

BLOCK A

BLOCK B

BLOCK C

Type

Amount

None (or less than \$1,001)	\$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	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$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 \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
	X											X							X												
	X											X							X												
	X											X							X												
	X											X							X												
	X											X							X												
	X											X							X												
	X											X							X												
	X											X							X												
	X											X							X												

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Reporting Individual's Name

SCHEDULE A continued
 (Use only if needed)

Page Number

Slutz, Pamela J. H.

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Assets and Income		Valuation of Assets at close of reporting period.											Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																			
BLOCK A		BLOCK B											BLOCK C																			
		None (or less than \$1,001)	\$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	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
																	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$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 \$1,000,000*	\$1,000,001 - \$5,000,000		
Blackrock Muni Income Trust (BFK) Fund		X												X							X											
Washington REIT (WRE)		X												X							X											
Weingarten Realty Investors (WRI)		X												X							X											
Yahoo (YHOO) Common Stock		X															X				X											
Chevron Corp (CVX) Common Stock		X															X				X											
Walt Disney Holding Co. (DIS)		X															X				X											
SPDR Fd Financial (XLF)		X												X							X											
iShares NASDAQ Biotechnology (IBB) Index (EFT)		X												X							X											
Powershares QQQ Trust Series I (QQQQ) (EFT)		X												X							X											

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Reporting Individual's Name

SCHEDULE A continued
(Use only if needed)

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Slutz, Pamela J. H.

Assets and Income

Valuation of Assets
at close of reporting period.

Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.

BLOCK A

BLOCK B

BLOCK C

	None (or less than \$1,001)	\$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	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
																Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$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 \$1,000,000*	\$1,000,001 - \$5,000,000		
Pentagon Federal Credit Union Checking/Savings Accounts			X															X		X											
State Department Federal Credit Union Checking Account			X															X		X											
COMPASS Bank Checking Account			X															X		X											
Arlington, Virginia (condo/rental property)					X													X							X						
Arlington, Virginia (house/rental property)						X												X							X						
Kerrville, Texas (undeveloped land)							X													X											

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate:

Do not complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

Reporting Individual's Name Slutz, Pamela J. H.	SCHEDULE B	Page Number 9 of 11
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Part I: Transactions

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, 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 property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

None ☐

by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.

property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

Identification of Assets		Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (x)										Certificate of divestiture	
		Purchase	Sale	Exchange		\$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	\$25,000,001 - \$50,000,000		Over \$50,000,000
Example	Central Airlines Common	x			2/1/99			x									
1																	
2																	
3																	
4																	
5																	

*This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$260, and (2) travel-related cash reimbursements received from one source totaling more than \$260. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by

the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$104 or less. See instructions for other exclusions.

None ☐

	Source (Name and Address)	Brief Description	Value
Examples	Nat'l Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)	\$500
	Frank Jones, San Francisco, CA	Leather briefcase (personal friend)	\$300
1			
2			
3			
4			
5			

Reporting Individual's Name

Shutz, Pamela J. H.

SCHEDULE C

Page Number

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Part I: Liabilities

Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude

a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

None ☐

Creditors (Name and Address)		Type of Liability	Date incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)											
						\$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*	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	
Examples	First District Bank, Washington, DC John Jones, 123 JSt., Washington, DC	Mortgage on rental property, Delaware Promissory note	1991 1999	8% 10%	25 yrs. on demand			X		X							
1	Wells Fargo Home Mortgage, Des Moines, IA	Mortgage on rental property, Arlington, Virginia	2001	6.0	30				X								
2	M&T Mortgage Corp, Buffalo, NY	Mortgage on rental property, Arlington, Virginia	1984	various	30		X										
3	Wells Fargo Home Mortgage	Loan to purchase undeveloped land, Kerrville, Texas	2008	6.0	2					X							
4	Pentagon Federal Credit Union Equity Line of Credit	Loan to renovate rental properties	2008	4.5	open		X										
5																	

* This category applies only if the underlying liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

Part II: Agreements or Arrangements

Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves

of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.

None ☒

Status and Terms of any Agreement or Arrangement		Parties	Date
Example	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Doc Jones & Smith, Hometown, State	7/85
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Reporting Individual's Name

Slutz, Pamela J. H.

SCHEDULE D

Page Number

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Part I: Positions Held Outside U.S. Government

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit

organization or educational institution. Exclude positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None ☒

Organization (Name and Address)		Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples	Natl Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1					
2					
3					
4					
5					
6					

Part II: Compensation in Excess of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other

non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.

None ☒

Source (Name and Address)		Brief Description of Duties
Examples	Doe Jones & Smith, Hometown, State Metro University (Client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1		
2		
3		
4		
5		
6		