
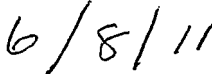
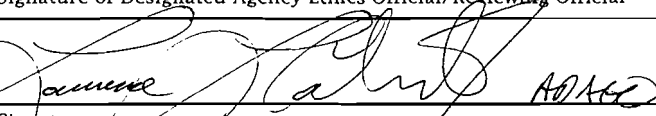
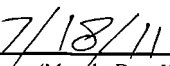
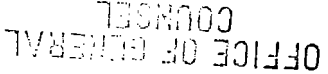



Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year) 05/13/2011		Reporting Status (Check Appropriate Boxes)	Incumbent <input type="checkbox"/>	Calendar Year Covered by Report	New Entrant, Nominee, or Candidate <input checked="" type="checkbox"/>	Termination Filer <input type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	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 Individual's Name		Last Name PAUL			First Name and Middle Initial RONALD E			
Position for Which Filing		Title of Position PRESIDENT			Department or Agency (If Applicable)			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.
Location of Present Office (or forwarding address)		Address (Number, Street, City, State, and ZIP Code) 837 W PLANTATION DRIVE, CLUTE, TX, 77531			Telephone No. (Include Area Code) 979-265-6000			
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)		Title of Position(s) and Date(s) Held U.S. CONGRESSMAN - TEXAS DISTRICT 14 1997-PRESENT						Nominees, New Entrants and Candidates for President and Vice President: Schedule A —The reporting period for income (BLOCK C) 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.
Presidential Nominees Subject to Senate Confirmation		Name of Congressional Committee Considering Nomination Not Applicable		Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Certification		Signature of Reporting Individual			Date (Month, Day, Year)			Schedule A —The reporting period for income (BLOCK C) 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.
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge.								
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			Date (Month, Day, Year)			
On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below).								
Office of Government Ethics Use Only		Signature			Date (Month, Day, Year)			
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)								
<div style="display: flex; justify-content: space-between;"> <div style="text-align: right;">   </div> <div style="text-align: center;"> (Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/> Reviewed for Apparent Compliance with the Federal Election Campaign Act (Check box if comments are continued on the reverse side) <input type="checkbox"/> </div> </div>								
							Agency Use Only	
							OGE Use Only	

SCHEDULE A

Reporting Individual's Name
 PAUL, RONALD E

Page Number
 2 of 10

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.													Date (Mo., Day, Yr.) Only if Honoraria																					
BLOCK A	BLOCK B												BLOCK C																							
For you, your spouse, and dependent children, report each asset held for investment or the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period, or which generated more than \$200 in income during the reporting period, together with such income. For yourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spouse, report the source but not the amount of earned income of more than \$1,000 (except report the actual amount of any honoraria over \$200 of your spouse). None <input type="checkbox"/>	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)					
	Examples	Central Airlines Common			x												x						x													
		Doe, Jones & Smith, Hometown, State		x																															Law Partnership Income \$130,000	
	Kempstone Equity Fund				x								x																							
	IRA: Heartland 500 Index Fund							x					x											x												
1	CARONA LTD						X																												Property Management Partnership	
2	CARR, LTD						X																			X									Property Management Partnership	
3	ACREAGE 9BT ARCHER, OYSTER CREEK, TEXAS				X															X																
4	CONDOMINIUM, 5300 HOLMES RUN PKWY, ALEXANDRIA, VA					X															X															
5	RONALD E. PAUL, M.D. ASSOC DEFINED BENEFIT PENSION PLAN																												X						Pension Distribution \$91,185	
6	AGNICO EAGLE MINES COMMON					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 PAUL, RONALD E	SCHEDULE A continued (Use only if needed)	Page Number 3 of 10
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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							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	Other Income (Specify Type & Actual Amount)			
1 ALLIED NEVADA GOLD CORP COMMON	X																			X															
2 ALUMINA LIMITED SPONS ADR		X															X				X														
3 BARRICK GOLD CORP					X												X					X													
4 BRIGUS GOLD CORP COMMON	X																				X														
5 CLAUDE RESEARCH INC		X																			X														
6 COEUR D'ALENE MINES CORP	X																				X														
7 DUNDEE CORP A	X																				X														
8 ELDORADO GOLD CORP			X																		X														
9 GOLDCORP INC NEW							X										X					X													

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Reporting Individual's Name PAUL, RONALD E	SCHEDULE A continued (Use only if needed)	Page Number 4 of 10
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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															
																Type		Amount													
																Dividends	Rent and Royalties	Interest	Capital Gains												Date
1	GOLDEN STAR RES LTD																			<input checked="" type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$250,000 <input type="checkbox"/> \$250,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
2	HECLA MINING CO																			<input checked="" type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
3	IAMGOLD CORP															<input checked="" type="checkbox"/>				<input type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
4	KINROSS GOLD CORP															<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
5	LEXAM VG GOLD INC COM NPV																		<input checked="" type="checkbox"/>	<input type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
6	MAG SILVER CORP ISIN																		<input checked="" type="checkbox"/>	<input type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
7	NEWMONT MINING CORP HLDG CO															<input checked="" type="checkbox"/>				<input type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input type="checkbox"/> \$1,001 - \$2,500 <input checked="" type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
8	PAN AMERICAN SILVER CORP															<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											
9	PETROL OIL & GAS INC																		<input checked="" type="checkbox"/>	<input type="checkbox"/> None (or less than \$201) <input type="checkbox"/> \$201 - \$1,000 <input type="checkbox"/> \$1,001 - \$2,500 <input type="checkbox"/> \$2,501 - \$5,000 <input type="checkbox"/> \$5,001 - \$15,000 <input type="checkbox"/> \$15,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000*											

* 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.

SCHEDULE A continued
 (Use only if needed)

Reporting Individual's Name		SCHEDULE A continued (Use only if needed)													Page Number																											
PAUL, RONALD E															5 of 10																											
BLOCK A	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 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										
1	SILVER BULL RES INC COM (NAME CHANGED FROM METALLINE MINING CO)	X																		X																						
2	SILVER WHEATON CORP COM			X													X																									
3	VIRGINIA MINES INC COM		X																																							
4	VISTA GOLD CORP COM NPV	X																																								
5	VITERRA INC COM		X																																							
6	WESDOME GOLD MINES LTD		X																																							
7	FEDERATED PRUDENT BEAR FUND		X										X																													
8	RYDEX INVERSE NASDAQ 1002X CL H		X										X																													
9	RYDEX INVERSE S&P 500 STRATEGY		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 PAUL, RONALD E	SCHEDULE B	Page Number 7 of 10
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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

	Identification of Assets		Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (x)													
			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	Certificate of divestiture		
	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 \$335 and (2) travel-related cash reimbursements received from one source totaling more than \$335. 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 \$134 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)	\$350
1				
2				
3				
4				
5				

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

Reporting Individual's Name PAUL, RONALD E	SCHEDULE B continued (Use only if needed)	Page Number 8 of 10
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Part I: Transactions

	Identification of Assets	Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (x)											
		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	Certificate of divestiture
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	
16																	

*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 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	Mortgage on rental property, Delaware	1991	8%	25 yrs.			x										
	John Jones, Washington, DC	Promissory note	1999	10%	on demand					x								
1	FIRST NATIONAL BANK OF LAKE JACKSON, LAKE JACKSON, TX	PERSONAL LOAN	2010	3.75	5 YRS					X								
2																		
3																		
4																		
5																		

*This category applies only if the 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.	Doe Jones & Smith, Hometown, State	7/85
1	ANNUAL DISTRIBUTION FROM PENSION PLAN BASED ON PLAN CALCULATOR	RONALD E. PAUL, M.D. ASSOC DEFINED BENEFIT PENSION PLAN	11/86
2			
3			
4			
5			
6			

Reporting Individual's Name PAUL, RONALD E	SCHEDULE D	Page Number 10 of 10
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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	Nat'l 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	CARONA LIMITED	PROPERTY MANAGEMENT	PARTNER	08/1993	PRESENT
2	CARR, LTD	PROPERTY MANAGEMENT	PARTNER	04/1993	PRESENT
3	RONALD E. PAUL, M.D. ASSOCIATION	MEDICAL CORPORATION	PRESIDENT	11/1969	PRESENT
4	FOUNDATION FOR RATIONAL ECONOMICS AND EDUCATION, INC.	NON-PROFIT EDUCATION	HONORARY CHAIRMAN	04/1979	PRESENT
5	THE CAMPAIGN FOR LIBERTY, INC.	NON-PROFIT 501 (C)(4)	HONORARY CHAIRMAN	06/2008	05/2011
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		