SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE C - I

shount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or mo any honoratia; list only the source for other spouse earned income exceeding \$1,000. See examples below.	EARNED INCOME
t employment by the U.S. government) totaling \$200 or more duseding \$1,000. See examples below.	Name: Cheen S. Modes
ore during the reporting period. For a spouse, list	Page 3 of 6

the source and amount of a EXCLUDE: Alliary pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Apt. INCOME LIMITS and PROMBITED INCOME: The 2023 that on outside earned income for Members and employees compensated at or above the "serior staff" rate was \$31,815. The 2024 that is \$31,815, in addition, certain types of income (notably honorarie, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited. Examples: State of Wisconsin ONE War Roundative (Oct. 2) State of Maryland Ontarto County Board of Education Source (include date of receipt for honoraria) Leaslative Person 7/1,880.00 Type
Approved Touching Foo Lagistative Penaton Spoune Speech Augn groups Amount 98,000 \$18,000 21,000 ₹

SCHEDULE D - LIABILITIES

ly time during the reporting secured by real property increased furniture, or appliant spouse. Report a revolve	
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ur spouse, or your d on their personal rea business in which yo unt (i.e., credit oard)	See See
ring the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the re issal properly including mortgages on their personal residence. Exchute: Any mortgage on your personal residence (un inture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities.	Name: Gylen S. Moore
he highest amount or rortgage on your perso se you are personally I acose of the reporting	-
wed during the reporting wai residence (unless you liable); and liabilities owed period exceeded	age 4 of 6

Report liabilities of over \$10,000 owed to any one creditor at any time during the reperiod. Members: Members are required to report all liabilities secured by seal propert it out or are a Member); loans secured by sutomobiles, household furniture, or to you by a spouse or the child, parent, or sibling of you or your spouse. Report \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

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	Residua, Miluantes, WI	Mortgage on Fersonal	Mortgage on Rectal Property, Dever, DE	Type of Liability	
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		X		\$50,001- \$100,000	
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				\$1,000,001- \$5,000,000	Amount of Liability
				\$5,000,001- \$25,000,000	
		_]		\$25,000,001- \$50,000,000	
				Over \$50,000,000 ~]
				Over \$1,000,000* (Spouse(DC	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nombrofit organization, labor organization, or educational or other heatitution other than the United States. Exclude:

SCHEDULE F - AGREEMENTS

identify the da continuation o employer.	ite, periles to, and general terms of any agreement or arrangement that you har defents of payments by a former or current employer other than the U.S. gr	identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government cervice; continuation or defend of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.
Date	Parties to Agreement	Terms of Agreement
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		Calcalohne)

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$480 received by you, your spouse, or your dependent child from any source during the year. Exchade:
Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbyfat or foreign agent), local meats, and gifts to a spouse or dependent child that are totally individually provided in the rule and some gifts require prior approval of the Committee on Ethics.

Source	Description	Value
Bishiptis: Nr., Joseph Sinth, Adington, VA	E0doa)	9500

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMEN

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Name: (JWEN) /40/8	
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identify the source and list travel timerary, dates, and nature of expenses provided for travel and travel-resisted expenses totaling more than \$480 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governmente, or by a foreign government required to be separately reported under the Foreign Giffs and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is trausive independent of his or her relationship to

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