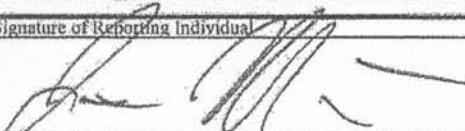
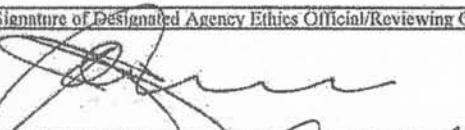


Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	Reporting Status (Check appropriate boxes)	Incumbent	Calendar Year Covered by Report	New Entrant, Nominee, or Candidate	Termination Filer	Termination Date (If Applicable) (Month, Day, Year)	Fee for Late Filing
Reporting Individual's Name	Last Name			First Name and Middle Initial			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.
Position for Which Filing	Title of Position			Department or Agency (If Applicable)			Reporting Periods
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code)			Telephone No. (Include Area Code)			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.
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			Senior Defense Analyst, US Senate Budget Committee, 2003-present			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.
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination			Do You Intend to Create a Qualified Diversified Trust?			Nominees, New Entrants and Candidates for President and Vice President:
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.
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.				MAY 12 2009			Schedule B--Not applicable.
Other Review (If desired by agency)	Signature of Other Reviewer			Date (Month, Day, Year)			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.
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing Official			Date (Month, Day, Year)			Schedule C, Part II (Agreements or Arrangements)-- Show any agreements or arrangements as of the date of filing.
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).				5/12/09			Schedule D--The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.
Office of Government Ethics Use Only	Signature			Date (Month, Day, Year)			Agency Use Only
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)							OGE Use Only
(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"/>							

SCHEDULE A

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B						Income: type and amount. If "None (or less than \$1,001)" is checked, no other entry is needed in Block C for that item.													
								BLOCK C													
<p>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.</p> <p>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).</p> <p>None <input type="checkbox"/></p>		<table border="1"> <tr> <td>None (or less than \$1,001)</td> <td>\$1,001 - \$15,000</td> <td>\$15,001 - \$50,000</td> <td>\$50,001 - \$100,000</td> <td>\$100,001 - \$250,000</td> <td>\$250,001 - \$500,000</td> <td>\$500,001 - \$1,000,000</td> <td>Over \$1,000,000*</td> </tr> </table>						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*	Type	Amount			Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)
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*														
Examples	Central Airlines Common	x						Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)								
	Doc Jones & Smith, Hometown, State	x						Exempted Trust					\$201 - \$1,000	\$1,001 - \$2,500							
	Kempstone Equity Fund	x											\$2,501 - \$5,000	\$5,001 - \$15,000							
	IRA: Heartland 500 Index Fund	x											\$15,001 - \$50,000	\$50,001 - \$100,000							
1	(J) Vanguard Wellington Fund (VWELX)	x						x			x		\$100,001 - \$250,000*	\$100,001 - \$250,000*							
2	(J) Vanguard Limited Term Tax Exempt Fund (VMLTX)	x						x			x		\$100,001 - \$250,000*	\$100,001 - \$250,000*							
3	(J) Vanguard Strategic Small Cap Equity Fund (VSTCX)	x						x			x		\$100,001 - \$250,000*	\$100,001 - \$250,000*							
4	(J) Entertainment Properties Trust (EPR)		x					x			x		\$100,001 - \$250,000*	\$100,001 - \$250,000*							
5	(J) Janus Twenty Fund (JAVLX)	x						x			x		\$100,001 - \$250,000*	\$100,001 - \$250,000*							
6	(J) DWS Latin America Equity Fund (SLAFX)	x						x			x		\$100,001 - \$250,000*	\$100,001 - \$250,000*							

* 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)

Page Number

3

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											Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)
		None (or less than \$201)	\$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	Expected Investment Fund	
	None <input type="checkbox"/>														
1	(J) Credit Suisse Global Small Cap Fund (WVCCX)	X													
2	Capital One Savings Account	X													
3	(J) Citibank Savings Account	X													
4	(J) Six Citibank 6-month CDs	X													
5	(DC) Upromise 529 Account consisting of the following: - Vanguard 500 Index Inst Fd (VFINX)	X													
6	- Vanguard Total Bond Market Index (VBMFX)	X													
7	- Vanguard Aggressive Growth Portf.	X													
8	Roth IRA consisting of: - Janus Overseas Fund (JAOSX)	X													
9	iShares S&P 100 Index Fund (OEF)	X													

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Prior Editions Cannot be Used.

Jamie M. Marin

SCHEDULE A continued

(Use only if needed)

Page Number

4

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B						Income: type and amount. If "None (or less than \$1,001)" is checked, no other entry is needed in Block C for that item.																																																																																									
								BLOCK C			Type			Amount			Other Income (Specify Type & Actual Amount)			Date (Mo., Day, Yr.)																																																																													
		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*			\$1,001 - \$5,000,000			\$5,000,001 - \$25,000,000			\$25,000,001 - \$100,000,000			Over \$50,000,000			Exempt Investment Fund			Excepted Trust			Qualified Trust			Dividends			Capital Gains			Interest			Rent and Royalties			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 - \$500,000			Over \$500,000*			\$1,001 - \$5,000,000			\$5,000,001 - \$25,000,000			Over \$25,000,000			Only if Honoraria		
None <input type="checkbox"/>																																																																																																	
1	ROTH IRA consisting of (cont'd): - Powershares QQQ (QQQQ)	X																																																																																															
2	(S) IRA consisting of: - Vanguard Explorer Fund (VEXPX)	X																																																																																															
3	- Vanguard International Value Fund (VTRIX)	X																																																																																															
4	- Vanguard Strategic Equity Fund (VSEQX)	X																																																																																															
5	- Vanguard REIT Index Fund (VGSIX)	X																																																																																															
6	- Vanguard PRIMECAP Core Fund (VPCCX)	X																																																																																															
7	(S) Roth IRA consisting of: - Vanguard Explorer Fund (VEXPX)	X																																																																																															
8	- Ebay Inc. (EBAY)	X																																																																																															
9	- Harbor International Fund (HAINX)	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.

Jamie M. Morin

SCHEDULE A continued

(Use only if needed)

Page Number

5

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	
None <input type="checkbox"/>		None (or less than \$1,000)		Type					Amount					Date (Mo., Day, Yr.)	
		\$1,001 - \$15,000		Type					Amount					Only if Honorary	
		\$15,001 - \$50,000		Type					Amount						
		\$50,001 - \$100,000		Type					Amount						
		\$100,001 - \$250,000		Type					Amount						
		\$250,001 - \$500,000		Type					Amount						
		\$500,001 - \$1,000,000		Type					Amount						
		Over \$1,000,000 *		Type					Amount						
1	ROTH IRA consisting of (cont'd):			Type					Amount						
2	- Berkshire Hathaway Class B (BRKB)	X		Type					Amount						
3	(S) BAE Systems Money Purchase Pension Plan (defined contribution) - Wells Fargo Stable Return	X		Type					Amount						
4				Type					Amount						
5				Type					Amount						
6				Type					Amount						
7				Type					Amount						
8				Type					Amount						
9				Type					Amount						

* 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, Vice Presidential or Presidential Candidate

SCHEDULE B

Page Number

6

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			Purchase	Sale	Exchange	Transaction Type (x)	Date (Mo., Day, Yr.)	Amount of Transaction (x)							Certificate of divestiture	
	Example: Central Airlines Common	1	2	3	4	5	\$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	\$1,000,001 - Over \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	
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 Frank Jones, San Francisco, CA	Airlines ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Leather briefcase (personal friend)	\$500 \$300
1			
2			
3			
4			
5			

Prior Editions Cannot Be Used.

Reporting Individual's Name
 Jamie M. Morin

Page Number

7

SCHEDULE C

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

Category of Amount or Value (x)

Creditor (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	\$1,000,001 - \$2,000,000	\$2,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
Examples: First District Bank, Washington, DC John Jones, 123 J St., Washington, DC	Mortgage on rental property, Delaware Promissory note	1991 1999	8% 10%	25 yrs. on demand			x			x			
1 TD Ameritrade, Omaha NE	Margin Account	2008	B+1%	on demand		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: continuing participation in an employee benefit plan (e.g. 401k, deferred compensation); (2) continuation 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

Example:	Status and Terms of any Agreement or Arrangement	Parties	Date:
1	None		
2			
3			
4			
5			
6			

Prior Editions Cannot Be Used.

Reporting Individual's Name
 Jamie M. Morin

SCHEDULE D

Page Number
 8

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	None				
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	None	
2		
3		
4		
5		
6		