SF278 (Rev. 03/2000) S C.F.R Pan 2634

## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Norm Approved: OMB No. 3209-0003

J.S. Office of Government Elitics			
Date of Appointment, Candidacy, Election of Nomination (Month, Day, Year)	Reporting Status Calendar Year (Check Incumbent Covered by Report	New Entrant, Nothings Permination cable) (Menulli, Lay, Tear)	Any individual who is required to
	althoughnitus gravia) X	or Çoudidate Filer	file this report and does so more than
	Last Name	First Name and Middle Initial	30 days after the date the report is required to be filed, or, if an extension
Reporting Individual's Name			is granted, more than 30 days after the
	C.deBaca	Luis E.	last day of the filing extension period
Position for Which Filing	Title of Position	Department or Agency (It Anothorble)	shall be subject to a \$200 fec.
osition for withen rung	Ambassador at Large, Trafficking in Persons	Department of State	Reporting Periods
	Address (Number, Street, City, State, and ZiP Code)	Telephone No. (finclade Aren Code)	Incumbents: The months occind is
ocation of Present Office or forwarding address)	2138 Raybum House Office Building Washington DC	20515 (202) 226-2421	the preceding calendar year except Pert II of Schedule C and Part I of Schedule D where you must also
osition(s) lield with the Federal	Title of Position(s) and Date(s) Held		include the filing year up to the date
Soverument During the Preceding 2 Months (If Not Same as Above)	Counsel, House Committee on Judiciary March	2007 to present	you file. Part II of Schedule D is not applicable.
5 Months (14 Mot page 82-Monds)	Courses, House Committee of Sudiciary Traiter	2007 CO PLESENC	аррисани
			Ternination Filers: The conntine
residential Nominees Subject to ienate Confirmation	Name of Congressional Committee Considering Nomination	Do You Julend to Create a Qualified Diversified Trusf?	period begins at the end of the period
Guare Comministran	Senate Foreign Relations Committee	Yes X No.	covered by your previous filing and ends at the date of fections flow. Part If
	4		of Schedule D is not applicable.
Certification CERTIFY that the statements I have	Signatuse of Reporting Individual	· Date (Month, Day, Tear) · · · · · ·	Nominees, New Entrants and
Clerk form and all attached chedules are true, complete and correct of the best of this knowledge.	How C	1/27/09	Candidates for President and Vice President:
	Signature of Other Reviewer	Date (Mounts, Day, Year)	Splanting A. The separation restrict for income (BLOCK C) is the preceding
		VAICTONDIA ZAIX 1EM	calendar year and the current catendar
Other Review (If desired by			year up to the date of filing. Value assets as of any date you choose that is
agency)			within 31 days of the date of filing.
gency Ethics Official's Opinion	Signature of Designated Agency Blaics Official/Reviewing Officia	Date (Month Day Year)	Schedule B-Not applicable
n the basis of information contained		/ /	
this report, I conclude that the filer is compliance with applicable laws and	1600	2/20/09	Schoolula C. Part I II inhibited The coporting period is the preceding
gulations (subject to any conuments the box below).	Junes Mesa	2/20/0/	calendar year and the current calendar
	Signature /	Dear (Month Day Year)	within 31 days of the date of fiting.
Office of Government Ethics			
Use Only ·	Will A Guel	1 3/27/09	Arrangements). Show any agreements
omments of Reviewing Officials (Hadditi	and space is required, use the reverse side of this sheet)		or arrangements as of the date of
	Clerk har if sit	ing extension granted & indicate number of days	filing.
	(5,102,102,103,103,103,103,103,103,103,103,103,103	A control of the cont	Schedule: 11-The recording period is
			the preceding two calendar years and
			the current calendar year up to the date of filing.
			Agency Use Only
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	77.4	(Check box if comments are continued on the reverse side)	MAR 2 6 2009
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5 C.F.R Part 2634	

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3	BLOCK A	+	T			1.77	BLOE	K B	1:		1	$\dashv$	11:4	T		m			· -			В	LOCK	Name and Address of the Owner, where					· · · · · ·	
report ea production value except perion in income with such for yours mount of han from eport the accome o	and the same of th	None (or less than \$1,001)		\$15,001 - \$50,000	\$50,001 - \$100,000	1.7	\$250,001 - \$500,000	\$500,001 - \$1,000,000	ST 000 001 - \$-5:000 000	\$5,000,001 - \$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000.	Excepted Investment Fund		大学 は 日本 は 日	Dividends Rents and Royalties	Anterest	Copiel Gains	ian \$201)	\$201 - \$1,000 Care and a second	\$1,001 - \$2,500 \$2,501 - \$5,000	\$5,001 - \$15,000	250,000	\$50,001 - \$100,000	\$100,001-51,000,000	Over \$1,000,000*	\$1,000,001, \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Ma., Dat Yr.) Only if Honorari
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	eporting Individual's Name			-					-		~~		-	~~~	-	÷				*	-				-			-		7	Page Number	
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	This category applies only if the asset/income is a	sole	yth	al of	the	filer	SSDC	use	or de	pend	ent c	hild	en.	If th	eas	set/in	ncor	ne is	eith	erih	OIS	Fthe	file	ror	joint	ly he	ld by	y the	filer	with	n the spouse or depe	endent children

	Office of Government Ethics	Schedule B if you are a new entrant,	nominee	, Vic	e P	resid	dential (	ויין זכ	apiu	CHILIC	ai Ca	naic	late				
	oning Individual's Name I de Baca	SCHE	<b>DULE</b> F	3										Page N	umber		
Pa	ert I: Transactions							None			:						
	ort any purchase, sale, or exchange by you, your spouse, ependent children during the reporting period of any rea				ensaci			i':			: An	ם ומנוסו	Trans	saction	(x)·		
pro	perty, stocks, bonds, commodity futures, and other urities when the amount of the transaction exceeded 300. Include transactions that resulted in a loss. Do not	your spouse, or dependent child. Check the "Cert divestiture" block to indicate sales made pursuant certificate of divestiture from OGE.	tificate of	Purchase	Sale	Exchange.	Date (Mo., Day, Yr.)	5,000	\$15,001 -	\$50,001	\$100,001 -	\$250,001	\$500,001 -	Over \$1,000,000*	\$1,000,0001 -	5,000,000	0,000,000
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H	Example:  Central Aidines Common			X .			211199			X.				· .		:  :	1
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	is category applies only if the underlying asset is solely he filer or jointly held by the filer with the spouse or dep				ther h	eld											
For lion food	rt II: Gifts, Reimbursements, and you, your spouse and dependent children, report it, and the value of: (1) gifts (such as tangible items it, or entertainment) received from one source total ravel-related cash reimbursements received from \$260. For conflicts analysis, it is helpful to indicersonal friend, agency approval under 5 U.S.C. § sority, etc. For travel-related gifts and reimbursements and the nature of expenses provided. Exclude	he source, a brief descrip- is, transportation, lodging, ling more than \$260; and one source tolating more ate a basis for receipt, such 4111 or other statutory ents, include travel itinerary,		rece inde the lotal for c	ved pend lonor valu ther	from ent of 's res e from exclu	mment, gi relatives; i f their rela idence. Al m one sour	receiv tionsh so, fo ce, ex	ed by	your s	spouse r prov	or d	epend as per	lent ch	hospid	tally tality a tine th truction	e ns
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as p autl date	Source (Name and Address)  Examples: Nat'l Assn. of Rock Collectors, NY, NY			5/99 (p	ersoni												
as p autl date	Source (Name and Address)  Examples: Nat'l Assn. of Rock Collectors, NY, NY			5/99 (6	ersoni		The same of the sa						••••				
as p auti date	Source (Name and Address)  Examples: Nat'l Assn. of Rock Collectors, NY, NY			2/99 (p	ersoni						v.						

SF 278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government Ethics	·														JAN-27
Reporting Individual's Name  Lou de Baca	SCHEDUL	EC						•			Page N	lumber			- 6002-
							7			انسنا	<u> </u>	٠.			- ŭ
Part I: Liabilities		•	٠					٠ .							_ 5
Report liabilities over \$10,000 owed to any one creditor at	personal residence unless it is rented out; loans secured		. No	ne X	-								1.4		- 0
any time during the reporting period by you, your spouse,	by automobiles, household furniture or appliances; and		٠					Catego	ry of A	mount	or Va	ue (x)			_ [
or dependent children. Check the highest amount owed	liabilities owed to certain relatives listed in instructions.	*1				-						1	. 0	100	
during the reporting period. Exclude a mortgage on your	See instructions for revolving charge accounts.	Daie .	Interest Rate	Term if	-0	- 0	. 8	000	00	000	Over. \$1,000,000	8.8	0,0	0,0	
		Historien.	, Maic	appli- cable	\$10,001	\$50,000	\$50,001 -	\$250,0	\$250,001	\$500,001-	Over.	51,000,00	000	8,00	3
Creditors (Name and Address)	Type of Liability	<u>}·</u>			₩ . <del>6</del>	15. SS	8 63	82.83	85 82	83 RA	Q. P.	42.83	S 55	2 23	5
Examples: First District Bank, Washington, DC John Jones, (2) J St., Washington, DC	Mortgage on rental property, Delaware Promissory note	1991	3%	on demand			<u> X</u> .								- 0
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This category applies only if the liability is solely that of the filt		filer or a je	oint liabilit	ty of the file	t										, proper
with the spouse or dependent children, mark the other higher cat	egories, as appropriale.														
Part II: Agreements or Arrangements															
Report your agreements or arrangements for: continuing p	articipation in an	of absen	ce: and (4	4) future e	mploy	ment.	See in	ostruc	tions	regan	ding	the re	portin	ġ, ·	
employee benefit plan (e.g. 401k, deferred compensation:	(2) continuation	of negot	iations fo	r any of th	ese an	angen	ients.	or be	nefits		U		• :		
payment by a former employer (including severance payment	ents); (3):leaves												٠.		
•						•				1	Vone.	X			
	Agreement or Arrangement		. · ·				and the state of the last of t		THE RESERVE TO A PERSON NAMED IN			*	1	Di	
Example: Pursuant to partnership agreement, will receive lump sur calculated on service performed through 1/00.	n payment of capital account & partnership share			Do	e Jones	& Smith		elown,	, State				٠.	:70	5
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Prior Editions Cannot Be Used.

SF 278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government Ethics		•	
Reporting Individual's Name	SCHEDULE D		Page Number
Part I: Positions Held Outside U.S. Government			
eport any positions held during the applicable reporting period, whether ompensated or not. Positions include but are not limited to those of an officer, irector, trustee, general partner, proprietor, representative, employee, or	consultant of any corporation, firm, partner mon-monit organization or educational instructional fratemat, or political entities and the	bition Exclude nositions with religious	None X
Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.) To (Mo., Yr.)
Examples: Nat'l Assn. of Rock Collectors, NY, NY Doc Jones & Smith, Hometown, State	Non-profil education	President Partner	7/85 Present
poe Jones de Battins atombiowit, state	- Law With	FRITIAL	7,00
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Part II: Compensation In Excess Of \$5,000 Paid by One eport sources of more than \$5,000 compensation received by you or your usiness 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 bus organization when you directly provided the of more than \$5,000. You need not report	e services generating a fee or payment	Do not complete this partifyou are an incumbent, Termination Filer, or Vice Presidential or Presidential Candidate
Source (Name and Address )			
xamples: Doe Jones & Smith, Homelowa, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university	construction	
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ior Editions Cannot Be Used.			