## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

F 278 (Rev. 03/2000) C.F.R. Part 2634 S. Office of Government Ethics

Form Approved: OMB No. 3209 - 0001

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)	Status Covered by Report Non	v Entrant, minee, or ndidate	Termination Termination Date (If Appli- Filer Cable) (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
Reporting	Last Name	First Name and M	iddle Initial	filed, or, if an extension is granted, more
Individual's Name	Santorum	Rick J.		than 30 days after the last day of the filing extension period, shall be subject
	Title of Position	Department or Ag	gency (If Applicable)	to a \$200 fee.
Position for Which Filing	President			Reporting Periods Incumbents: The reporting period is
Location of	Address (Number, Street, City, State, and ZIP Code)		Telephone No. (Include Area Code)	the preceding calendar year except Part Il of Schedule C and Part I of Schedule D
Present Office (or forwarding address)	PO Box 37, Verona PA 15147		515-421-7224	where you must also include the filing year up to the date you file. Part II of
Position(s) Held with the Federal	Title of Position(s) and Date(s) Held			Schedule D is not applicable.
Government During the Preceding 12 Months (If Not Same as Above)	Not Applicable			Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends
Barrier Manual Manual Continue	Name of Congressional Committee Considering Nomination	Do You Intend to C	Create a Qualified Diversified Trust?	at the date of termination. Part Il of Schedule D is not applicable.
Presidential Nominees Subject to Senate Confirmation	Not Applicable	Yes	⊠ No	Nominees, New Entrants and Candidates for President and
Certification	Signature of Reporting Individual	· · · · · · · · · · · · · · · · · · ·	Date (Month, Day, Year)	Vice President:
ICERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge.	Kuy Toutoun		8/2/11	Schedule AThe reporting period for Income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets
Other Review	Signature of Other Reviewer		Date (Month, Day, Year)	as of any date you choose that is within 31 days of the date of filing.
(If desired by agency)				Schedule BNot applicable.
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing O	official )	Date (Month, Day, Year)	Schedule C, Part I (Liabilities)The reporting period is the preceding calendar
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).	eurene Cali		10/25/11	year and the current calendar year up to any date you choose that is within 31 days of the date of filing.
	Signature		Date (Month, Day, Year)	Schedule C, Part II (Agreements or
Office of Government Ethics Use Only				Arrangements)Show any agreements or arrangements as of the date of filing.
Comments of Reviewing Officials (	I If additional space is required, use the reverse side of this sh	neet)	<b>!</b>	Schedule D The reporting period is the preceding two calendar years and the current calendar year up to the date
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LZ das 1102 Review	ved for Apparent Compliance			
with th	e Federal Election Campaign Act			OGE Use Only
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Supersedes Prior Editions, Which Car	nnot Be Used.	278-112		NSN 7540-01-070-84
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	1	Central Airlines Common					х												х						х						$\vdash$	$\vdash$				$\neg$
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	1	Kempstone Equity Fund						×				Γ.	$I_{-}$	<u> </u>		×										х					t:	t.		[		
_		IRA: Heartland 500 Index Fund	$\Box$				Ш			х				$\perp$		×											x									
1	Rental	Property: 306 Beaver Plaza State College, PA						×												×								×								
2	Rental	Property: 304 Beaver Plaza State College, PA						×												×								×								
3	Rental	Property: 603 Beaver Terrace State College, PA						×												×								×								
4	Rental	Property: 604 Beaver Terrace State College, PA						×												×								×								
5	Rental	Property: 610 Beaver Terrace State College, PA						×	П											×								×								
6	Checki	ing Account: PNC Bank					×														×		×													
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			None (or less than \$1,001)	1 _	1 .	1 _	1	\$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	l Royalties	Interest	Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000		\$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
1	Checking Account: BB&T		×	4															×		×												
2	Checking Account: Citibank		×	4															×		×												
3	Universal Health Services, Inc. Stock King of Prussia, PA					×											×			×				×								\$395,414 - Director Fees/ Stock Options	
4	IRA: Stifel Financial (Civic Science, Inc. Stoc	<b>(</b> )		×																	×												
5	IRA: Stifel Financial (iSHARES iBOXX Corp. Bond Fund)				×																×												
6	IRA: Stifel Financial (Apple Computer Stock)			×													×				×												
7	IRA: Stifel Financial (American Funds - Washington Mutual Investors Fund)			×										×							×												
8	IRA: Stifel Financial (American Funds - Ticke ABNDX)	r:		×										×							×												
9	IRA: Stifel Financial (Opnext, Inc. Stock)		×	<													×				×												
	* This category applies only if the asset/inco by the filer with the spouse or dependent of	me is hildr	solei en, r	ly th nark	at of	the othe	filer er hi	r's sp gher	ous	e or	dep	end of va	ent ( lue,	chile as a	drer appr	ı. lf opri	the iate.	asse	t/in	ıcon	ne is	eith	ner t	hat	of th	ne fi	ler o	or jo	intl	y he	ld		

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1	IRA: Stifel Financial (SPDR Gold Trust - ETF)	)		×														×				×													
2	IRA: Stifel Financial (Oncogenex Pharmaceuticals, Inc. Stock)		1	×	1													×				×												Г	
3	IRA: Stifel Financial (Market Vectors Gold Miners Fund)		1	×											×							×													
4	IRA: Stifel Financial (Expedia, Inc. Stock)			×														×				×		-											
5	IRA: Stifel Financial (Range Resources Corporation Stock)			×														×				×													
6	IRA: Stifel Financial (JDS Uniphae Corporation	on)		×														×				×													
7	IRA: Stifel Financial (Market Vectors ETF Jr. Gold Minders Fund)			×	ight]													×				×													
8	IRA: Stifel Financial (Frontier Communication Corporation Stock)	ns		×														×				×													
9	IRA: Stifel Financial (Keryx Biopharmaceutica Inc. Stock)	als,		×														×				×													
	* This category applies only if the asset/inco by the filer with the spouse or dependent	me is childr	sole	ely t mar	hat k th	of t	the f	filer r hig	's si gher	oous	e or	dep	end of va	lent due,	chil as a	drei	n. If	the	ass	et/i	ncon	ne is	eith	ner t	hat	of tl	ne fi	ler c	or jo	intl	y he	ld			

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1	IRA: Stifel Financial (Annaly Capital Management, Inc. Stock)				×													×				×												
2	IRA: Stifel Financial (Investment Co. of Ame Mutual Fund)	erica		×											×			×				×												, <i>n</i> .,
3	IRA: Stifel Financial (Universal Health REIT	Γ)		×														×				×												
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5	IRA: Stifel Financial (General Mills Stock)			×														×				×												
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7	IRA: Stifel Financial (Rex Energy Corporation Stock)	on		×		İ												×				×												
8	IRA: Stifel Financial (Ishares Silver Trust E	TF)		×														×				×		7		7								
9	IRA: Stifel Financial (Finisar Corporation St	tock)		×														×				×		7	+	1								
	* This category applies only if the asset/ine by the filer with the spouse or dependen	come is	s so	lely , ma	that irk tl	of the o	the f	iler' hig	s sp her	ous	e or	dep ies c	end of va	ent lue,	chile as a	drer	ı. lf opri	the	asse	t/in	com	e is	eith	er th	at c	f th	e fil	er c	or jo	intly	y he	ld		

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1	IRA: Stifel Financial (Fabrinet Inc. Stock)		×	:													×				×												
2	IRA: Stifel Financial (Dreyfus Money Market Account)			×															×		×			-									
3	529 Plan (Sarah Maria): Stifel Financial (American Funds - Ticker: CICAX)		×	:[										×							×	·											
4	529 Plan (Sarah Maria): Stifel Financial (American Funds - Ticker: CLBAX)		×	:										×							×												
5	529 Plan (Sarah Maria): Stifel Financial (American Funds - Ticker: CITAX)		×											×			П				×												
6	529 Plan (Sarah Maria): Stifel Financial (American Funds - Ticker: CFAAX)		×	:										×							×			$\prod$									
7	529 Plan (Sarah Maria): Stifel Financial (American Funds - Ticker: CGFAX)		×	=										×							×												
8	529 Plan (Daniel): Stifel Financial (American Funds - Ticker: CICAX)	1	×	:										×							×												
9	529 Plan (Daniel): Stifel Financial (American Funds - Ticker: CLBAX)	1	×											×							×												
	* This category applies only if the asset/inc by the filer with the spouse or dependent	ome is	solel en, n	y th: nark	at of the	the othe	filer er hi	's sr gher	ous	e or egor	dep	end of va	ent d	chile as a	dren appr	ı. lf opri	the	asse	et/in	con	ie is	eith	er t	hat	of th	ne fi	ler (	or jo	intly	y hel	ld		

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			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		\$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
1	529 Plan (Daniel): Stifel Financial (America Funds - Ticker: CITAX)	ın		×	-										×				**			×												
2	529 Plan (Daniel): Stifel Financial (America Funds - Ticker: CFAAX)	ın		×											×							×												
3	529 Plan (Daniel): Stifel Financial (America Funds - Ticker: CGFAX)	an		×											×							×												
4	529 Plan (Patrick): Stifel Financial (Americ Funds - Ticker: CNWAX)	an		×											×							×					·							
5	529 Plan (Patrick): Stifel Financial (Americ Funds - Ticker: CLBAX)	an		×											×							×												
6	529 Plan (Patrick): Stifel Financial (Americ Funds - Ticker: CITAX)	an		×											×							×												
7	529 Plan (Patrick): Stifel Financial (Americ Funds - Ticker: CFAAX)	an		×											×							×												
8	529 Plan (Patrick): Stifel Financial (Americ Funds - Ticker: CWIAX)	an		×											×							×												
9	529 Plan (Patrick): Stifel Financial (Americ Funsd - Ticker: CGFAX)	an		×											×				-			×												
Γ	* This category applies only if the asset/in by the filer with the spouse or depender	come is	s so ren	lely , ma	tha ark t	t of the o	the othe	filer r hiş	's sp gher	ous	e or	dep	end of va	ent due,	chil as a	drei appi	n. lf	the	asse	et/in	соп	ne is	eith	er t	hat	of th	ne fi	ler o	or jo	ointl	y he	ld		

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1	529 Plan (Patrick): Stifel Financial (America Funds - Ticker: CICAX)	n	,	<										×							×												
2	529 Plan (Peter): Stifel Financial (American Funds - Ticker: CICAX)		7>	<										×							×												
3	529 Plan (Peter): Stifel Financial (American Funds - Ticker: CLBAX)		,	<										×		. :					×												
4	529 Plan (Peter): Stifel Financial (American Funds - Ticker: CITAX)		,	<b>〈</b>										×							×												
5	529 Plan (Peter): Stifel Financial (American Funds - Ticker: CFAAX)		,	<										×							×												
6	529 Plan (Peter): Stifel Financial (American Funds - Ticker: CGFAX)		,	<										×							×												
7	529 Plan (John): Stifel Financial (American Funds - Ticker CWIAX)		,	<										×							×												
8	529 Plan (John): Stifel Financial (American Funds - Ticker: CITAX)		,	<										×							×												
9	529 Plan (John): Stifel Financial (American Funds - Ticker: CFAAX)		,	<b>‹</b>										×							×												
	* This category applies only if the asset/inc by the filer with the spouse or dependen	ome is t childr	sole en, i	ly th mark	at of the	the othe	filer r hiş	's sp gher	ous	e or egor	dep ies c	end of va	ent lue,	chile as a	drer appr	ı. If	the ate.	asse	et/in	con	e is	eith	er ti	hat o	of th	ne fi	ler o	or jo	intl	y he	ld		

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r	Assets and Income			at	Va	alu	ati of	on	of	As	se	ts rio	d					Iı	1CC	) m	e: t	ype	ar	nd a	mo	un / is	t. I	f "l	Non	ie (	or	less	s th	han \$20 or that i	1)" is
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			Т																Ту	рe							Α	m	oui	nt					
			l le	,001 - \$	\$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)	44		\$2,501 - \$5,000	\$5,001 - \$15,000	1.1	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	I	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1	IRA (Spouse): American Funds - Ticker: ANd	CFX			×										×			×				×											T		
2	IRA (Spouse): American Funds - Ticker: AM	ECX			×										×			×				×											T		
3	IRA (Spouse): American Funds - Ticker: AB	ALX			×										×			×				×											T		
4	E*Trade Account: Opnext, Inc. Stock			×									-					×				×											T		
5	E*Trade Account: Keryx Biopharmaceuticals	s,		×														×				×													
6	E*Trade Account: Rex Energy Corporation Stock			×														×				×													
7	E*Trade Account: JDS Uniphase Corporatio Stock	n		×														×				×													
8	E*Trade Account: Frontier Communications Corporation Stock			×														×				×													
9	E*Trade Account: Finisar Corporation Stock			×														×				×									T		T		
	* This category applies only if the asset/inc by the filer with the spouse or dependen	come is	sol ren,	lely ma	that rk t	t of he c	the :	filer r hig	's sp gher	ous	e or	dep	end of va	lent due,	chile as a	drer appr	n. If	the	asse	et/ir	con	ie is	eith	er t	hat	of tl	ne fi	ler	or jo	oint	y he	eld			

	Reporting Individual's Name santorum, Rick J.									SC					E A					ue	đ										Pag	ge Number	40
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	Assets and Income		а	V at cl	alu lose	1at	ior rep	10 por	f As	sse g pe	ts erio	d					In C	nco hec	om :kec	e: t	ype o o	an the	nd a	ımo	oun y is	t. Ii ne	f "N ede	lon ed i	e (e n B	or le	ess k C	than \$20 for that i	1)" is tem.
L	BLOCK A	$\bot$	_				BLO	CK !	В					L			L							BL	OCK	i c							
																		Ту	pe		L					A	mo	oun	1t				
		None (or less than \$1 001)	1 - \$15,000		١'	\$100,001 - \$250,000	1			\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	Ι	اجَ	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
1	E*Trade Account: Exfo Inc. Stock		×														×				×												
2	E*Trade Account: Oclaro, Inc. Stock		×														×		T		×			П									
3	E*Trade Account: Fabrinet, Inc. Stock		×	:													×				×												
4	E*Trade Account: Oncogenex Pharmaceuticals inc. Stock	i,	×											Γ		T	×				×			П			П						
5	Ethics and Public Policy Center, Washington, DC																															\$217,385 - Senior Fellow Compensation	
6	News Corp., New York, NY																Γ															\$239,153 - Contributor Compensation	
7	Philadelphia Inquirer, Philadelphia, PA																										$\prod$					\$23,000 - Columnist Compensation	
8	Salem Radio, Camarillo, CA																										П					\$83,999 - Talk Show Host Compensation	
9	Consol Energy Inc., Canonsburg, PA																															\$142,500 - Consultant Compensation	
	* This category applies only if the asset/incomby the filer with the spouse or dependent of	ie is s	olel	y th	at of	the	file	r's s	pou	se o	r dej	pend	lent	chi	ildre	n. If	f the	ass	et/iı	ncon	ne is	eith	ier t	hat	of th	ne fi	ler c	or jo	intly	y hel	ld		

ı	Reporting Individual's Name									SC	H	EΓ	U	LI	E A	<b>A</b> (	:01	nti	nı	aeo	d										Pa	ge Number	
Sa	antorum, Rick J.																	led														11 of	16
	Assets and Income			at o	/al :lose	uat e of	ior rep	of ort	As	se pe	ts rio	d					II Cl	nec	m kec	e: t	ype o o	ar the	ıd a r ei	ntry	o <b>u</b> n y is	t. I	f "N ede	Non ed i	ie (	or l	ess k C	than \$20 for that	1)" is tem.
	BLOCK A			_			BLO	CK E																BL	оск	С							
		l l	- [	-													<u>'</u>	Ty	рe							Α	mo	ur	1t				
			Η	\$1,001 - \$15,000	\$50.001 - \$100.000	1 _	\$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
1	Clapham Group, Washington, DC																															\$125,000 - Consultant Compensation	
2	American Continental Group, Washington, I	DC																														\$65,000 - Consultant Compensation	
3																						. •											
4			1																														
5																														_			
6			1																							-	_						
7			T	1																										$\vdash$			
8			1																												_		
9													-																		_		
	* This category applies only if the asset/in by the filer with the spouse or depender	come is at childre	sole	ly th	at o	the othe	filer er hiş	's sr gher	ous	e or	dep ies c	end of va	ent lue,	chil as a	drer appr	ı. If opri	the ate.	asse	t/ir	con	ie is	eith	er t	hat	of th	ne fi	ler o	or jo	intly	y he	ld		

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

Reporting Individual's Name Santorum, Rick J.	SCHED	ULI	E E	3							Page	Num		f 16		
											<u> </u>	<u> </u>		1 10		
Part I: Transactions Report any purchase, sale, or exchange by you, your spouse, or dependent	Do not report a transaction involving property used solely as your personal	None														
children during the reporting period of an	residence, or a transaction solely between	Tra T	nsact	ion x)				A	moun	t of T	ransa	ction	(x)			
real property, stocks, bonds, commodity futures, and other securities when the	you, your spouse, or dependent child.  Check the "Certificate of divestiture" block		7 - 1	Ϊ	Date			Τ.	Τ.	0	0*.	1-0	1 - 00	20-	8	of
amount of the transaction exceeded \$1,00	00. to indicate sales made pursuant to a	se		ge	(Mo., Day, Yr.)	2,5	58	\$100,001 - \$100,000 \$100,001 -	8 8	100,	00'0	\$1,000,001 -	\$5,000,001 - \$25,000,000	00	\$50,000,000	Certificate of divestiture
Include transactions that resulted in a loss	s. certificate of divestiture from OGE.	Purchase	Sale	Exchange	24), 111)	1,00	0,00	0000	000	00,1	,000	00,5	5,00	0,00	100	ertifi vest
	cation of Assets	_	ΐ	i ii		8 8	69.69		4 84 84	65.65	Ó₩	69.69	69.69	\$ 8	5 <del>64</del> €	<u>8,0</u>
Example   Central Airlines Common		х		$\vdash$	2/1/99	$\vdash$		×	+-	├—		-		$\dashv$	-{	
Not Applicable				Ш						L						
2				li			i									
3														-		
4						П										
5			_												一	
Part II: Gifts, Reimburs For you, your spouse and dependent child tion, and the value of: (1) gifts (such as ta food, or entertainment) received from one (2) travel-related cash reimbursements ret than \$260. For conflicts analysis, it is help as personal friend, agency approval under authority, etc. For travel-related gifts and dates, and the nature of expenses provide	received from one source totaling more than \$260, and second from one source totaling more than \$100 the description of the des	S. Gove ed from endent onor's ralue from er exce	ernn m re t of t resid rom clusi	nent; lative their lence one s ons.	given to yo es; received relationshi e. Also, for source, excl	our ag l by y p to y purp	our s ou; o oses	spouse or pro of agg	or do ided/ regati	ependas poing g	dent ersor ifts t	child nal h o det	l tota ospit ermi instr	ally ality ne th uctio	ne ns	
Source (Name and Address)		Bı	ief D	escri <sub>I</sub>	ption									Va	lue	
Examples Nat'l Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to nation	al confe	erenc	e 6/15	/99 (personal	activi	ty uni	elated	o duty	)			]	\$5		
Frank Jones, San Francisco, CA	Leather briefcase (personal friend)													\$3	00	
Not Applicable																
2																
3			-													
4																
5																_

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

Reporting Individual's Name Santorum, Rick J.	DCIILD OLL D COMMITTEE						Page Number 13 of 16										
Part I: Transactions																	
	Transaction Type (x)				Amount of						Transaction (x)						
		Purchase		Exchange	Date (Mo., Day, Yr.)	\$1,001 - \$15,000	5,001 - 0,000	0,001 -	00,001 - 50,000	50,001 - 00,000	00,001 -	'er ,000,000*	,000,000,	5,000,000	5,000,0001 -	o,000,000	rtificate of restiture
ldent	ification of Assets	7	Sale	ъщ		\$12	\$1 \$5	\$5	\$1	\$2	\$1	50 €	\$1 \$5	\$2	\$52	58	ಕ್ಟಿ
Not Applicable																	
2																	
3																	
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15						-									$\dashv$		
16												_		$\dashv$	$\dashv$	$\dashv$	
*This category applies only if the underly	*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 with the spouse or dependent children, use the other higher categories of value, as appropriate.																

SF 278 (Rev. 03/2000) 5 C.F.R. Part 2634 U.S. Office of Government Ethics Page Number Reporting Individual's Name SCHEDULE C Santorum, Rick J. 14 of 16 Part I: Liabilities a mortgage on your personal residence None unless it is rented out; loans secured by Report liabilities over \$10,000 owed Category of Amount or Value (x) automobiles, household furniture to any one creditor at any time during the reporting period by you, or appliances; and liabilities owed to Over \$50,000,000 \$5,000,001 -\$25,000,000 your spouse, or dependent children. certain relatives listed in instructions. Over \$1,000,000\* \$500,001 -\$1,000,000 \$1,000,001-\$5,000,000 \$50,001 -\$100,000 \$100,001-\$250,000 \$250,001 Check the highest amount owed See instructions for revolving charge during the reporting period. Exclude accounts. Term if Interest Date Rate applicable Creditors (Name and Address) Type of Liability Incurred 25 yrs. 1991 8% First District Bank, Washington, DC Mortgage on rental property, Delaware Examples 1999 John Jones, 123 JSt., Washington, DC 10% on demand Promissory note х 15 yrs. M&T Bank, Buffalo, NY Mortgage on rental properties, State College, PA 2009 4.25 15 yrs. Mortgage on rental properties, State College, PA M&T Bank, Buffalo, NY 2009 5.46 6 yrs. Ford Credit, Sterling, VA Automobile Loan 2011 6.09 \*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 of absence: and (4) future employment. See instructions regarding the reportemployee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuaing of negotiations for any of these arrangements or benefits. None X tion of payment by a former employer (including severance payments); (3) leaves **Parties** Status and Terms of any Agreement or Arrangement Date Doe Jones & Smith, Hometown, State 7/85 Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share Example calculated on service performed through 1/00.

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Reporting Individual's Name		SCHEDULE D		Page Number	40							
Santorum, Rick J.					15 of	16						
Re sa tri	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, rustee, 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											
F	Organization (Name		Type of Organization	Position Held	From (Mo., Yr.)	To (Mo.,Yr.)						
	Nat'l Assn. of Rock Collectors, NY, NY		Non-profit education	President	6/92	Present						
Exa	Doe Jones & Smith, Hometown, State		Law firm	Partner	7/85	1/00						
1	Universal Health Services, King of Prussia, P.	ersal Health Services, King of Prussia, PA		Board of Directors Member	04/2007	06/2011						
2	Christendom College, Front Royal, VA	stendom College, Front Royal, VA		Advisory Board Member	06/2007	06/2011						
3	Ethics and Public Policy Center, Washington, DC		Christian Policy Center	Senior Fellow	01/2007	06/2011						
4 News Corp., New York, NY			Media Conglomerate	News Contributor	02/2007	03/2011						
5 Philadelphia Inquirer, Philadelphia, PA			Newspaper	Newspaper Columnist	11/2007	07/2011						
6 Salem Radio, Camarilla, CA			Radio Station	Talk Show Host	07/2009	06/2011						
R b	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  Do not complete this part if you are Incumbent, Termination Filer, or Vi Presidential or Presidential Candidate services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.  None											
Source (Name and Address)			Brie		-							
Examples Doe Jones & Smith, Hometown, State			Legal services									
Metro University (client of Doe Jones & Smith), Moneytown, State			Legal services in connection with university construction									
Universal Health Services, King of Prussia, PA			Advise company as Member of Board of Directors									
2	Ethics and Public Policy Center, Washington,	rer, Washington, DC Policy analysis -										
3	News Corp., New York, NY		News Contributor									
4	hiladelphia Inquirer, Philadelphia, PA  Newspaper Columnist											
5	Salem Radio, Camarilla, CA		Talk Show Host									
6	6 CONSOL Energy Inc., Canonsburg, PA Energy policy consulting services											

Reporting Individual's Name Santorum, Rick J.			SCHEDULE D		Page Number 16 of	16						
Rer	art I: Positions Held	pplicable reporting period, whethe	r compen- organization or educational	institution. Exclude positions		,						
sate	ed or not. Positions include but are r stee, general partner, proprietor, rep corporation, firm, partnership, or o	not limited to those of an officer, doresentative, employee, or consulta	lirector, social, fraternal, or political ant of nature.	entities and those solely of an	an honorary None 🔲							
一	Organization (Name		Type of Organization	Position Held	From (Mo., Yr.)	To (Mo.,Yr.)						
	Nat'l Assn. of Rock Collectors, NY, NY		Non-profit education	President	6/92	Present						
Exan	Examples Doe Jones & Smith, Hometown, State		Law firm	Partner	7/85	1/00						
1	CONSOL Energy Inc., Canonsburg, PA	SOL Energy Inc., Canonsburg, PA		Consultant	07/2007	06/2011						
2	Clapham Group, Washingon, DC	am Group, Washingon, DC		Consultant	10/2010	Present						
3	American Continential Group, Washington, DC		Government Affairs and Consulting Firm	Consultant	07/2009	Present						
4												
5												
6												
Re bu	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  Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.  Presidential or Presidential Candidate.  Services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.  None											
Source (Name and Address)			Brief Description of Duties									
Doe Jones & Smith, Hometown, State			Legal services									
Examples Metro University (client of Doe Jones & Smith), Moneytown, State			Legal services in connection with university construction									
1	Clapham Group, Washington, DC	omini, Moneytoni, State	Consulting services.									
2	American Continental Group, Washington, Do	С	Legislative policy consulting services									
3	Fortegra Financial (client of American Continu	ental Group), Jacksonville, FL	Consulting in connection with insurance processing policy									
4	14											
5												
6												