

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 27, , 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
Team Sununu c/o Capital Campaigns 19528 Ventura Boulevard, Suite 647 Tarzana, CA 91356	Senate for New Hampshire	\$1300	3/18/08
Dreier for Congress P.O. Box 505 Upland, CA 91785	Congress for California	\$4600	4/3/08
John McCain 2008 Compliance Fund P.O. Box 16118 Arlington, VA 22215	John McCain 2008 Compliance Fund	\$2300	4/22/08
Booker Team for Newark (Cory Booker) P.O. Box 200334 Newark, NJ 07102	Mayor of Newark, NJ	\$5000	5/16/08
Antonio Viaraigosa 420 East 3 rd Street, Suite 1012 Los Angeles, CA 90013	Mayor of Los Angeles, CA	\$1000	5/29/08
McCain Victory California 3927 Elm Avenue Long Beach, CA 90807	Presidential campaign	\$28,500	9/5/08
John Kennedy P.O. Box 14861 Baton Rouge, LA 70898	Senate for Louisiana	\$2300	9/26/08
Mayor Bob Foster P.O. Box 92045 Long Beach, CA 90809	Mayor for Long Beach, CA	\$500	12/30/08
Friends of Byron Dorgan 420 C Street, NE Washington, DC 20002	Congress from North Dakota	\$2400	4/21/09
Cantor Victory Fund Attn: Matthew Jubitz 515 S. Figueroa Street, Suite 1060 Los Angeles, CA 90071	Congress from Virginia	\$2000	5/1/09
Dreier for Congress Committee Attn: Matthew Jubitz 515 S. Figueroa Street, Suite 1060 Los Angeles, CA 90071	Congress for California	\$2000	5/1/09
Halter for Arkansas P.O. Box 94399 North Little Rock, AR 72190	Senate for Arkansas	\$4000 (\$2,000 reimbursed 3/29/10)	5/1/09
Booker Team for Newark P.O. Box 200334 Newark, NJ 07102	Mayor of Newark, NJ	\$5000	6/17/09

Hoeven for Senate c/o Anne Hyde Dunsmore 6016 Corbin Avenue Tarzana, CA 91356	Senate for North Dakota	\$4800	3/12/10
Re-Elect Mayor Foster P.O. Box 92045 Long Beach, CA 90809	Mayor of Long Beach, CA	\$500	3/12/10
Quayle for Congress 4247 N. 44 th Street Phoenix, AZ 85018	Congress for Arizona	\$2400	3/24/10
Friends of John Thune Capital Campaigns 6016 Corbin Avenue Tarzana, CA 91356	Senate for South Dakota	\$4800	3/29/10
Toomey for Senate P.O. Box 7272 Alexandria, VA 22307	Senate for Virginia	\$1000	3/31/10

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 
Bradford M. Freeman

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 - (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 30, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

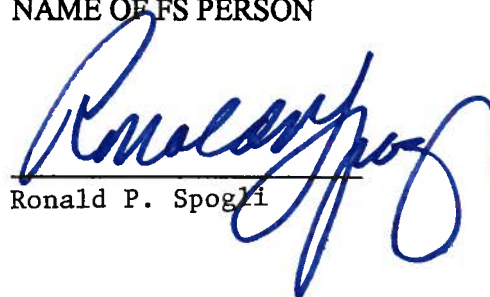
- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
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- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By:



Ronald P. Spogli

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
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ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 15, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
McCain Victory 2008	PRESIDENT, OTHER REPUBLICAN CANDIDATES AT DISCRETION OF RNC	\$100,000	4/28/2008
COLLEGE REPUBLICAN NAT'L COMM	-	\$15,000	2/1/2008
McCain	PRESIDENT	\$2,300	1/15/2008

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: John M Roth

-
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ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

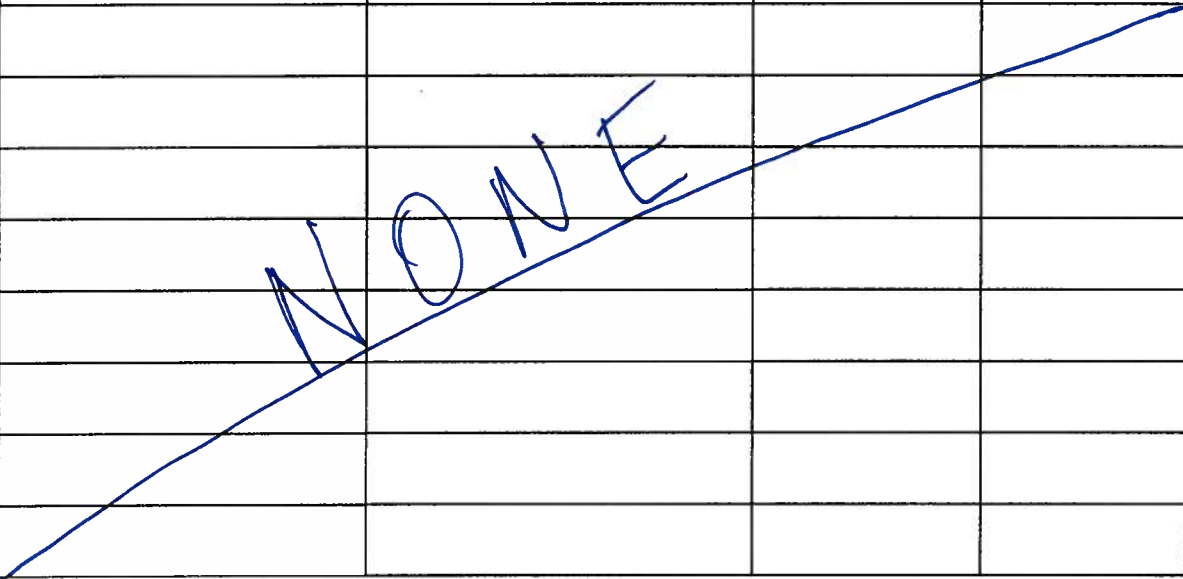
Dated: 5/3, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

JAMES F. SIMMONS
NAME OF FS PERSON

By: 

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: May 18, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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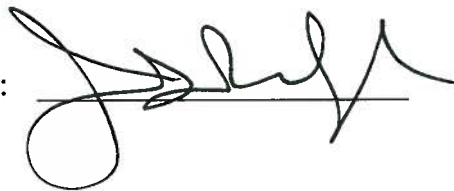
- (1) Any candidate for local, state or federal elected office;
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- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
NONE			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By:



-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 - (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 30, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
KEITH HALLORAN	New Hampshire State Rep	\$500	10/21/08
DANA HAWLEY	Oxford County, ME Probate Judge	\$250	10/8/08

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 
Todd W. Halloran

-
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ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 30, 2010

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Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
2008			
Committee to Reelect Judge Ralph W. Dau	Los Angeles Superior Court	\$ 500	3/17/2008
Villaraigosa for Mayor 2009	Mayor of Los Angeles	\$1,000	5/28/2008
Rocky Delgadillo Officeholder Account	Los Angeles City Attorney	\$1,000	7/17/2008
Obama for President	President of the United States	\$2,300	7/31/2008
Bernard Park for Supervisor	Supervisor of County of Los Angeles	\$1,000	10/17/2008
2009			
Friends of Barbara Boxer	U.S. Senate	\$ 200	6/4/2009
Rocky Delgadillo for Attorney General 2010	California Attorney General	\$2,000	6/4/2009
Chris Essel for City Council 2009	Los Angeles City Council	\$ 500	6/15/2009
Karen Sage for Judge	District Court Judge of Travis County, Texas	\$2,500	7/23/2009
Mitchell Englander for City Council	Los Angeles City Council	\$ 500	9/17/2009
Chris Essel for City Council	Los Angeles City Council	\$ 500	9/29/2009
Yaroslavsky for Supervisor 2010	Supervisor of County of Los Angeles	\$1,000	11/19/2009
Anthony De Los Reyes for Superior Court Judge 2010	Los Angeles Superior Court	\$1,000	11/19/2009

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
2010			
Karen Sage for Judge	District Court Judge of Travis County, Texas	\$2,000	3/8/2010
Stupak for Congress	U.S. Congress	\$2,000	4/5/2010

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NAME OF FS PERSON



By: William M. Wardlaw

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
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ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 20, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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- (6) Any political party, local, state or county political committee; or
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Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
NONE			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 
Benjamin Geiger

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: May 12, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
NONE			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: BJB
BRAD J. BRUTOCAO

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
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ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: May 1, 2010

The undersigned (the "FS Person"), on behalf of himself ⁽¹⁾ and his ⁽²⁾ Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
NONE			

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NAME OF FS PERSON

By: Joe Hatty
 JOE HATTY

-
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ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: 5/3, 2010

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Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None.			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: Lu Lasevell.
 Lu Lasevell;

-
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ATTACHMENT 1**FORM OF INITIAL CERTIFICATION**

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N/A			

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NAME OF FS PERSON

By: Sarah W. Overlag

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
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ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: May 4, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

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Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None			

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NAME OF FS PERSON

By: 
 Christian B Johnson

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 (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 15, 2010

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Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None	None	None	None

(ii) Each of the FS Person and [his]^g[her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 
John Hwang

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 2

FORM OF ANNUAL CERTIFICATION

Dated: April 29, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:


(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the immediately preceding calendar year to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
N/A			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 
Emily Bonnett

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 - (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 30, 2010

The undersigned (the "FS Person"), on behalf of ~~himself~~[herself]⁽¹⁾ and ~~his~~[her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

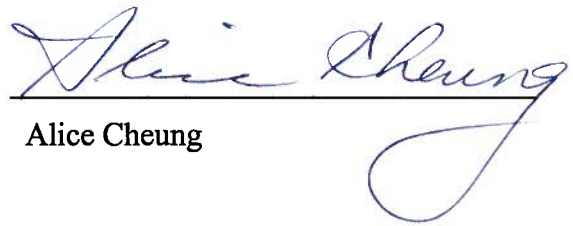
(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None contributed			

(ii) Each of the FS Person and ~~his~~[her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON



By: Alice Cheung

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 30, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 
 Kathleen Dailey

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: MAY 3, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
	(NINE)		

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: Sylvia Gason

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 - (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 30, 2010

The undersigned (the "FS Person"), on behalf of ~~himself~~⁽¹⁾ ~~herself~~ and ~~his~~⁽¹⁾ ~~her~~ Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None contributed from January 1, 2008 to April 30, 2010.			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON



By: Mimi Gina

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: MAY 3, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
NONE			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: Christy L. Gowdy
Christy L. Gowdy

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 29, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: _____

Lillian A. Kabakali

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 - (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: 5/4, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

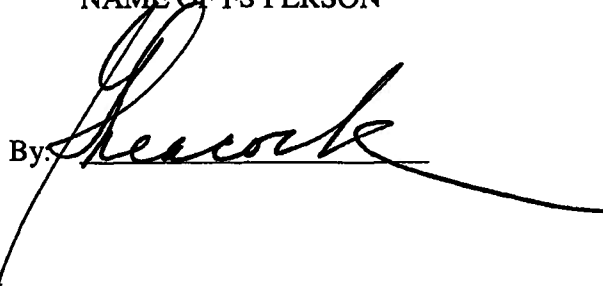
(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None		None	
"		"	
"		"	
"		"	
"		"	
"		"	
"		"	
"		"	

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 1**FORM OF INITIAL CERTIFICATION****Dated:** April 16, 2010

The undersigned (the "FS Person"), on behalf of ~~himself~~ [herself]⁽¹⁾ and ~~his~~ [her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
N/A			

(ii) Each of the FS Person and ~~his~~[her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: Carol Lintz

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
(2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: April 26, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
* Carl Fiorina	senator of California	\$250.00	12/29/09
* Meg Whitman	GOVERNOR of California	\$250.00	12/29/09

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

* ONLY contributions for 2009 listed because we will be marrying in 2011.

NAME OF FS PERSON

By: Jenny Lo

-
- (1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 - (2) Please insert additional rows as necessary.

ATTACHMENT 1

FORM OF INITIAL CERTIFICATION

Dated: 4/29/2010, 2010

The undersigned (the "FS Person"), on behalf of [himself][herself]⁽¹⁾ and [his][her] Relatives, is providing this certificate in connection with the policies and procedures established by Freeman Spogli & Co and its affiliates (collectively, "Freeman Spogli") to ensure compliance with the New York Attorney General's Public Pension Fund Reform Code of Conduct (the "Code") and similar restrictions imposed by other jurisdictions where Freeman Spogli conducts its business. Capitalized terms used and not defined in this certificate will have the meanings specified in the Code.

The FS Person hereby certifies to Freeman Spogli as follows:

(i) Set forth below⁽²⁾ is a true and accurate list of all of the political contributions I, or any of my Relatives, made during the period from January 1, 2008 to the date hereof to:

- (1) Any candidate for local, state or federal elected office;
- (2) Any person who is responsible for or can influence the investment decision by a public pension fund;
- (3) Any person who appoints anyone who is responsible for or can influence the investment decisions by a public pension fund;
- (4) Any candidate for any official position described in (2) or (3) above;
- (5) Any fiduciary of a public pension fund;
- (6) Any political party, local, state or county political committee; or
- (7) Any political action committee.

Name and title of recipient of contribution	Office or position for which contribution given	Amount of contribution	Date of contribution
None			

(ii) Each of the FS Person and [his][her] Relatives has been in compliance with the provisions of the Code since February 16, 2010.

NAME OF FS PERSON

By: 
 Selena Lohmiller

(1) Please modify this form by using the bracketed terms that apply to you and deleting those that do not apply.
 (2) Please insert additional rows as necessary.