

**LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2014**

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 847-3901. The completed disclosure form is due May 15, 2015 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

Peter Barner  
 PRINT NAME

CHECK APPROPRIATE HOUSE:  Senate  General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2014. Please note that a minor child is a child under the age of 18. For each entry, mark the box of the appropriate recipient. When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000 - \$24,999.99; 3=\$25,000 - \$49,999.99; 4=\$50,000 or more.

**I. EARNED INCOME:** List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing, fees, pensions and Social Security.)

	Name of Employer	Address of Employer	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	Law Offices of Peter Barner - Edison, N.J.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	N.J. State	Trenton, N.J.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	Township of Edison, Edison, N.J. - Summer Job		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4)	Metuchen Country Club, Edison, N.J. - Summer Job		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**II. UNEARNED INCOME:** List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

**A. RENTS**

	Property Address	Tenant Name	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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LEGISLATIVE COUNSEL

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

**B. DIVIDENDS**

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	See Attached Exhibit.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**C. INCOME from investments, trusts and estates (including capital gains).**

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	See Attached Exhibit.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**III. HONORARIA and FEES:** List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.

	Name & Nature of Honorarium or Fee	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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STATE OF NEW JERSEY  
TREASURER OF REVENUE

**IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE:** List the name, address, nature and amount for each source of reimbursement or prepaid expense and indicate whether source is a profit (P), nonprofit (N), or governmental (G) entity.

	Name & Nature of Reimbursement or Prepaid Expense	Address	Amount Code				Self	Spouse	Child	Check Source		
			1	2	3	4				P	N	G
1)	Law Offices of Peter Barker, Edison, N.J.		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

**V. GIFTS:** List the name, address, nature and amount for each source of gift to you, your spouse or minor child from a named donor connected to the legislative process.

	Name & Nature of Gift	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
	<i>from a named donor</i>								
1)	None. To be amended if change		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	Small desk clock. Metuchen - Edison YMCA		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	Small desk crystal. N.J. Legal Service		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	Plaque, N.J. Hemophilia Assoc.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**VI. LIABILITIES:** List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

	Name & Nature of Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	Line of Credit, Chase Bank, Metuchen, N.J.		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	Metro Park Association, Iselin, N.J.		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**VII. FORGIVEN LIABILITIES:** List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

	Name & Nature of Forgiven Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	None		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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STATE OF NEW JERSEY  
LEGISLATIVE SERVICES

**VIII. BUSINESS ORGANIZATIONS:** List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	Law Offices of Peter Barnes, Edison, N.J.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

**IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS:** List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

	Position Held	Name & Address of Entity	Self	Spouse
1)	Kiddie Keeps Well Camp, Edison, N.J. - Volunteer Board Attorney		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

**X. REAL ESTATE:** Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	72 Buchanan Rd., Edison, N.J.	Family Home	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

11/24/15  
 \_\_\_\_\_  
 Date

Peter Barnes / Original #1  
 \_\_\_\_\_  
 Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

**VIII. BUSINESS ORGANIZATIONS:** List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	Law Offices of Peter Barnes, Edison, N.J.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

**IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS:** List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

	Position Held	Name & Address of Entity	Self	Spouse
1)	Riddie Kegs Well Camp, Edison, N.J. - Volunteer Board	Attorney	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

**X. REAL ESTATE:** Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	72 Buchanan Rd., Edison, N.J.	Family Home	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

3/24/15  
Date

STOLMAN  
JALY  
10

Peter Barnes / Original #2  
Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

II. UNEARNED INCOME

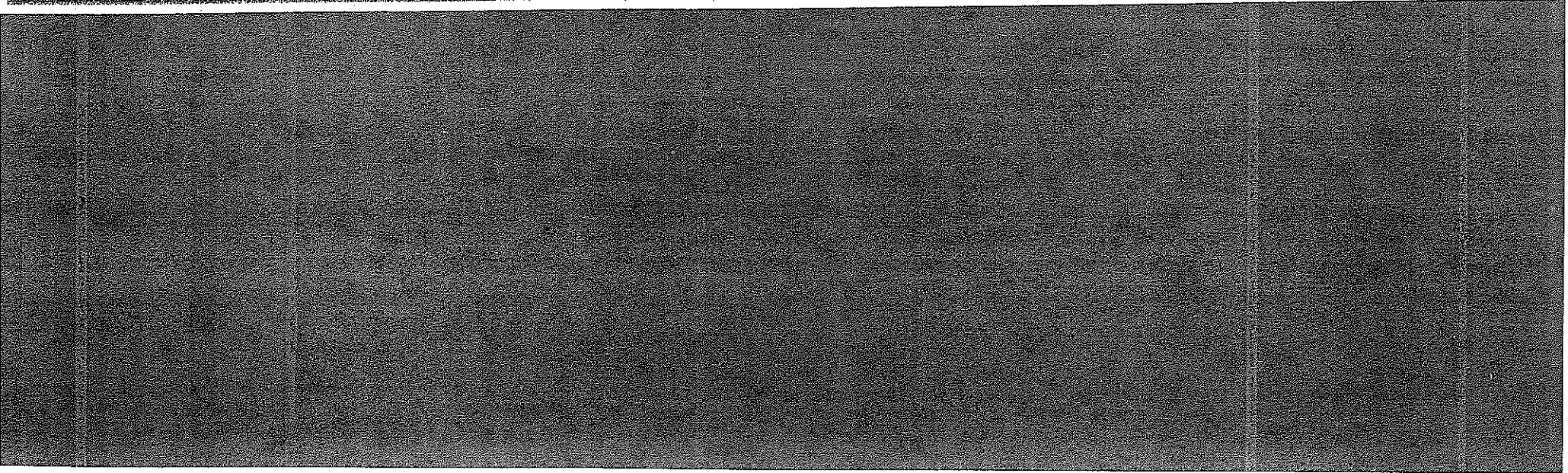
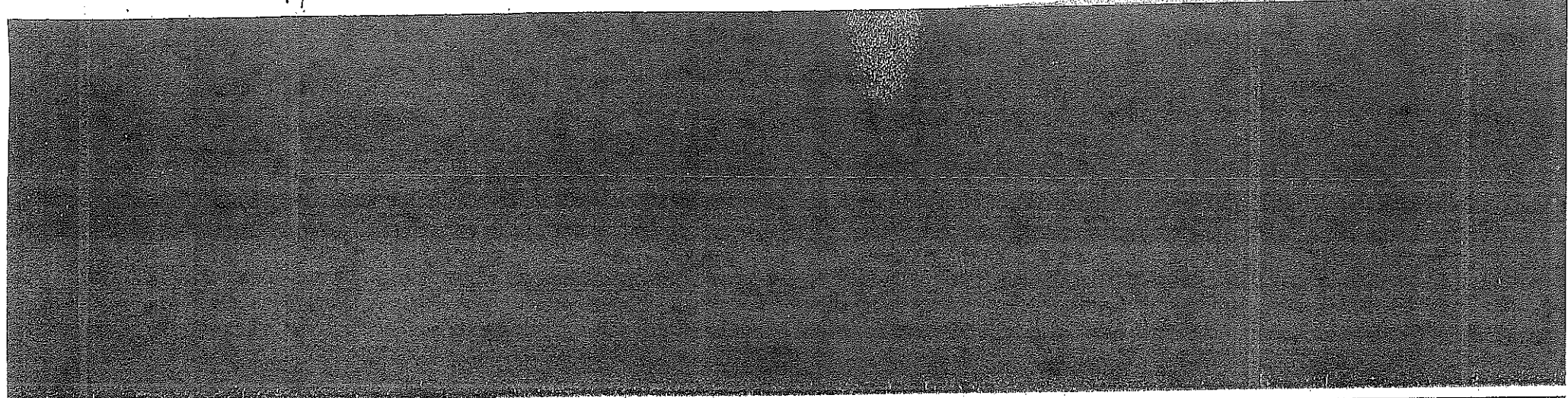
8

DIVIDENDS

NAME	ADDRESS	CIRCLE AMOUNT CODE				SELF	SPOUSE	CHILD
		1	2	3	4			
PRINCIPAL FINANCIAL GROUP, INC	PUBLICLY TRADED SECURITIES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CITIGROUP SMITH BARNEY	PUBLICLY TRADED SECURITIES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CITIGROUP SMITH BARNEY	PUBLICLY TRADED SECURITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CITIGROUP SMITH BARNEY	PUBLICLY TRADED SECURITIES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CITIGROUP SMITH BARNEY	PUBLICLY TRADED SECURITIES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
WILLIAM BLAIR FUNDS	PUBLICLY TRADED SECURITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CITIGROUP SMITH BARNEY	PUBLICLY TRADED SECURITIES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
WILLIAM BLAIR FUNDS	PUBLICLY TRADED SECURITIES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CITIGROUP SMITH BARNEY	PUBLICLY TRADED SECURITIES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
WILLIAM BLAIR FUNDS	PUBLICLY TRADED SECURITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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UP  
ACTIVE  
SERVICES



①

INCOME FROM INVESTMENTS, TRUST AND ESTATES (INCLUDING CAPITAL GAINS)

	NAME	ADDRESS	CIRCLE AMOUNT CODE	SELF	SPOUSE	CHILD
1)	METUCHEN SAVINGS BANK	429 MAIN STREET, METUCHEN, NJ	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	JPMORGAN CHASE BANK	ONE WALL STREET, NEW YORK, NY	② 1 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)	JPMORGAN CHASE BANK	ONE WALL STREET, NEW YORK, NY	① 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4)	CITIGROUP SMITH BARNEY	388 GREENWICH ST, NEW YORK, NY	1 2 ③ 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5)	CITIGROUP SMITH BARNEY	388 GREENWICH ST, NEW YORK, NY	1 ② 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6)	CITIGROUP SMITH BARNEY	388 GREENWICH ST, NEW YORK, NY	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7)	PRINCIPAL LIFE INSURANCE	711 HIGH STREET, DES MOINES, IA	1 2 ③ 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8)	A.P.M. LIMITED PARTNERSHIP	222 WEST ADAMS STREET, CHICAGO, IL	1 ② 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9)	F.C. FISCHER DEED 1/18/54	785 OLD HAMMONDS FERRY ROAD, LINTHICUM, MD	1 2 ③ 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10)	F.C. FISCHER TRUST F/B/O CATHERINE BARNES	P.O. BOX 94661, CLEVELAND, OH	1 ② 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11)	METUCHEN SAVINGS BANK	429 MAIN ST, METUCHEN, NJ	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12)	WILLIAM BLAIR FUNDS	222 WEST ADAMS STREET, CHICAGO, IL	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13)	CITIGROUP SMITH BARNEY	388 GREENWICH ST, NEW YORK, NY	1 ② 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14)	A.P.M. LIMITED PARTNERSHIP	222 WEST ADAMS STREET, CHICAGO, IL	② 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15)	METUCHEN SAVINGS BANK	429 MAIN ST, METUCHEN, NJ	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16)	WILLIAM BLAIR FUNDS	222 WEST ADAMS STREET, CHICAGO, IL	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17)	CITIGROUP SMITH BARNEY	388 GREENWICH ST, NEW YORK, NY	1 ② 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18)	A.P.M. LIMITED PARTNERSHIP	222 WEST ADAMS STREET, CHICAGO, IL	② 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19)	F.C. FISCHER TRUST F/B/O CATHERINE BARNES	P.O. BOX 94661, CLEVELAND, OH	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20)	METUCHEN SAVINGS BANK	429 MAIN ST, METUCHEN, NJ	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
21)	YARDVILLE NATIONAL BANK	P.O. BOX 8487, TRENTON, NJ	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
22)	WILLIAM BLAIR FUNDS	222 WEST ADAMS STREET, CHICAGO, IL	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23)	CITIGROUP SMITH BARNEY	388 GREENWICH STREET, NEW YORK, NY	① 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
24)	A.P.M. LIMITED PARTNERSHIP	222 WEST ADAMS STREET, CHICAGO, IL	② 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

25) Chase Bank - Metuchen, N.J. ① X

26) Chase Bank - Metuchen, N.J. ① X

27) Metuchen Savings Bank, Metuchen, N.J. ① X

28) U.S. Treasury, Incestral Savings Bonds ①; Child

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OFFICE OF THE ATTORNEY GENERAL SERVICES

From PETER J. BARNES III, ESQ.

To Leg. Counsel Date 5/14/15

- For Your Information
- Read and File
- Read and Destroy
- Read and Return
- For Your Approval
- May I Discuss With You?
- For Follow-up On \_\_\_\_\_
- Investigate and Report
- Please Handle
- Please See Me
- As Requested
- For Your Records
- Please Call Me

Remarks \_\_\_\_\_

Amendment to Initial  
Submission - Financial  
Disclosure for 2014

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OFFICE OF  
LEGISLATIVE  
SERVICES



Peter Barnes						
DIVIDENDS						
	NAME	ADDRESS	AMOUNT CODE	SELF	SPOUSE	CHILD
1	Principal Financial Group	Publicly Traded Securities	1	X		
2	Morgan Stanley	Publicly Traded Securities	2	X		
3	Morgan Stanley	Publicly Traded Securities	3		X	
4	Morgan Stanley	Publicly Traded Securities	3	X		
5	Morgan Stanley	Publicly Traded Securities	1			X
6	Morgan Stanley	Publicly Traded Securities	1			X
7	William Blair	Publicly Traded Securities	1			X
8	Morgan Stanley	Publicly Traded Securities	1			X
9	Morgan Stanley	Publicly Traded Securities	1			X
10	William Blair	Publicly Traded Securities	2			X
11	Morgan Stanley	Publicly Traded Securities	1			X
12	William Blair	Publicly Traded Securities	1			X
INCOME FROM INVESTMENTS, TRUST, AND ESTATES						
	NAME	ADDRESS	AMOUNT CODE	SELF	SPOUSE	CHILD
1	Metuchen Savings Bank	429 Main St, Metuchen, NJ	1	X		
2	Morgan Stanley	1 New York Plaza, 8th Floor, New York, NY	1	X		
3	Morgan Stanley	1 New York Plaza, 8th Floor, New York, NY	4		X	
4	A.P.M Limited Partnership	1435 Long Road, Kalamazoo, MI	4		X	
5	Frederick C Fisher Irr Trust	1600 Market St, 4th Floor, Philadelphia, PA	3		X	
6	F.C. Fisher Trust	PO Box 94641, Cleveland, OH	4		X	
7	Frederick C Fisher Family Trust	151 S Rose St, Kalamazoo, MI	4		X	
8	Metuchen Savings Bank	429 Main St, Metuchen, NJ	1			X
9	Morgan Stanley	1 New York Plaza, 8th Floor, New York, NY	1			X
10	Morgan Stanley	1 New York Plaza, 8th Floor, New York, NY	2			X
11	A.P.M Limited Partnership	1435 Long Road, Kalamazoo, MI	2			X
12	Metuchen Savings Bank	429 Main St, Metuchen, NJ	1			X
13	Morgan Stanley	1 New York Plaza, 8th Floor, New York, NY	1			X
14	Morgan Stanley	1 New York Plaza, 8th Floor, New York, NY	2			X
15	A.P.M Limited Partnership	1435 Long Road, Kalamazoo, MI	2			X
16	Metuchen Savings Bank	429 Main St, Metuchen, NJ	1			X
17	Investors Bank	101 JFK Parkway, Short Hills, NJ	1			X
18	Morgan Stanley	1 New York Plaza, 8th Floor, New York, NY	2			X
19	A.P.M Limited Partnership	1435 Long Road, Kalamazoo, MI	2			X

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OFFICE OF  
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SERVICES