OGE Form 278e (Updated Nov. 2021) (Expires 11/30/24)
U.S. Office of Government Ethics; 5 C.F.R. part 2634 | Form Approved: OMB No. (3209-0001)

Report Type:	Annual
Year (Annual Report only):	2022
Date of Appointment/Termination:	10/09/2022



# Executive Branch Personnel Public Financial Disclosure Report (OGE Form 278e)

Filer's Information							
Last Name	First Name	MI	Position	Agency			
Patterson	Sara	S	COVID Implementation and Ev	CDC/ATSDR			
Other Federal Government Positions Held	During the Preceding 12 Month	ns:	•	•			
Name of Congressional Committee Consideration	ering Nomination (Nominees o	nly):					
Not Applicable							
Filer's Certification - I certify that the states	ments I have made in this repor	t are true, o	complete and correct to the best of my knowledge	ge: (eSigned in EPATS)			
Signature:			Date:				
Sara S. Patterson			6/17/2023				
Agency Ethics Official's Opinion – On the (subject to any comments below) (eSigned in		in this repo	ort, I conclude that the filer is in compliance wit	h applicable laws and regulations			
Signature:			Date:				
Sylana Tramble			12/22/2023				
Other Review Conducted By: (eSigned in EPA	ATS)						
Signature:			Date:				
Dorretha B. Turner			12/21/2023				
U.S. Office of Government Ethics Certification	tion (if required):						
Signature:			Date:				
Comments of Reviewing Officials:							
nitial Technical Review Date: 12-12-2023; Employee has an outside position on file.; HHS-521: No // Compared to pre-clearance OGE 278/450; Annual Ethics Training							
completed: 11-4-2022 // Statement of w							

No	te: This is a public form. Do not include	de account numbers,	street addresses, or family member na	ames. See instructions for required info	ormation.					
	er's Name				Page Number					
Pa	tterson, Sara S									
Pa	Part 1: Filer's Positions Held Outside United States Government									
#	Organization Name	City/State	Position Held	From	To					
1.	Day League	Decatur/GA	Non-profit	Secretary	02/09/2022	12/31/2022				
2.										
3.										
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	r's Name					Page Number				
Pat	atterson, Sara S									
Pa	rt 2: Filer's Employment Assets and Income	_								
#	Description	EIF	Value	Income Type	Income Amount					
1.	None									
2.										
3.										
4.										
5.										
6.										
7.										
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Filer's Name Page Number						
	tterson, Sara S					
Pa	rt 3: Filer's Employme	ent Agreements a	nd Arrangements			
#	Employer or Party		Status and Terms		Date	
	None					
2.						
3.						
4.						
5.						
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7.						
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9.						
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11.						
12.						

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	ler's Name Page Number							
Pat	terson, Sara S							
Pa	rt 4: Filer's Sources of Compensa	ation Exceeding	\$5,000 in a Year					
#	Source Name	City/State	Brief Description of Duties					
1.								
2.								
3.								
4.								
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INO	te: This is a public form. Do not include account numbers	s, stree	et addresses, or family membe	er names. See instruct	ions for required informati	on.				
File	er's Name					Page Number				
Pat	tterson, Sara S									
Pa	art 5: Spouse's Employment Assets and Income									
#	Description	EIF	Value	Income Type	Income Amount					
1.	None									
2.										
3.										
4.										
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INC	ite: This is a public form. Do not include account number	s, sire	et addresses, or ramily membe	er names. See instruc	lions for required informati	on.			
Fil	r's Name Page Number								
Pa	tterson, Sara S								
Pa	art 6: Other Assets and Income								
#	Description	EIF	Value	Income Type	Income Amount				
1.	U.S. money market account (cash)	N/A	\$100,001 - \$250,000	Interest	\$1,001 - \$2,500				
2.	GA (Path2College 529) 2032/2033 Enrollment Portfolio	Υ	\$15,001 - \$50,000		None (or less than \$201)				
3.									
4.									
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15.									

No	Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.							
	er's Name			Page Number				
	terson, Sara S							
	rt 7: Transactions	Т	<u> </u>					
	Description	Туре	Date	Amount				
1.	None							
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20.								

iler's Name	t include account numbers, street addre				Page Number
atterson, Sara S					
Part 8: Liabilities					
Creditor Name	Туре	Amount	Year Incurred	Rate	Term
. FedLoan Servicing	student loan	\$15,001 - \$50,000	2003	0	120 months
0.					
1.					
2.					
3.					
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9.					
0.					

No	te: This is a public form. Do not includ	e account numbers	s, street addresses, or family member names. See instructions for required infor	nation.					
Filer's Name Page Number									
Pat	tterson, Sara S								
Pa	Part 9: Gifts and Travel Reimbursements								
#	Source Name	City/State	Brief Description		Value				
1.	None								
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