Exhibit XI - 3

December 13, 1973

CERTIFICATION

I hereby certify that the attached is a true copy of the original joint federal income tax return of Richard M. and Patricia R. Nixon which was filed with the Internal Revenue Service for the period ending December 31, 1971.

Raymond F. Harless
Raymond F. Harless
Deputy Commissioner
of Internal Revenue

94-4605

1040 U.S. Department of the Treasury / Internal Revenue Service
U.S. Individual Income Tax Return **1971**

Richard M. and Patricia R. | Nixon
The White House
Washington D. C. 20500
President of the United State

Filing Status—check only one
1 [ ] Single
2 [X] Married filing jointly (even if only one had income)
3 [ ] Married filing separately and spouse is also filing
4 [ ] Unmarried Head of Household
5 [ ] Surviving widow(er) with dependent child
6 [ ] Married filing separately and spouse is not filing

Exemptions
7 Yourself X
8 Spouse X — 2
9 First names of your dependent children who lived with you
10 Number of other dependents (from line 33)
11 Total exemptions claimed — 2

Income

12	Wages, salaries, tips, etc. (Attach Forms W-2 to back. If unavailable, attach explanation)	200 000 00
13c	Dividends ... 13b Less exclusion $ ... Balance	
14	Interest. If $100 or less, enter total without listing in Schedule B; If over $100, enter total and list in Part II of Schedule B	17 732 04
15	Income other than wages, dividends, and interest (from line 40)	([illegible] 97)
16	Total (add lines 12, 13c, 14 and 15)	162 384 75
17	Adjustments to income (such as "sick pay," moving expense, etc. from line 45)	
18	Adjusted gross income (subtract line 17 from line 16)	162 384 75

- See page 3 of instructions for rules under which the IRS will figure your tax
- If you do not itemize deductions and line 18 is under $10,000, find tax in Tables and enter on line 19
- If you itemize deductions or line 18 is $10,000 or more, go to line 46 to figure tax.

Tax, Payments and Credits

19	Tax (Check if from: [ ] Tax Tables 1-13, [X] Tax Rate Sch. X, Y, or Z, [ ] Sch. D, [ ] Sch. G or [ ] Form 4726)	878 03
20	Total credits (from line 54)	
21	Income tax (subtract line 20 from line 19)	878 03
22	Other taxes (from line 60)	—
23	Total (add lines 21 and 22)	878 03
24	Total Federal income tax withheld (attach Forms W-2 or W-2P to back)	60 667 44
25	1971 Estimated tax payments (include 1970 overpayment allowed as a credit)	100 00
26	Other payments (from line 64)	
27	Total (add lines 24, 25, and 26)	60 767 44

Bal. Due or Refund

28	If line 23 is larger than line 27, enter BALANCE DUE	
29	If line 27 is larger than line 23, enter OVERPAYMENT	59 889 41
30	Line 29 to be: (a) REFUNDED	58 889 41
	(b) Credited on 1972 estimated tax	1 000 00

Foreign Accounts
31 Did you, at any time during the taxable year, have any interest in or signature or other authority over a bank, securities, or other financial account in a foreign country (except in a U.S. military banking facility operated by a U.S. financial institution)? If "Yes," attach Form 4683. (For definitions, see Form 4683.) [ ] Yes [X] No

Sign here

Arthur Blech C. P. A.
5900 Wilshire Blvd
Los Angeles Calif 90036

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53-6002[illegible]

U. S. Executive Office
Treasury Department - Bureau of Accounts
15th & Pennsylvania Ave., NW
Washington, D. C. 20500

Type or print EMPLOYER'S Federal identification number, name, and address above.

WAGE AND TAX STATEMENT—1971

(For use in States or Cities authorizing combined form)

Employer's State identification number

Copy B—To be filed with employee's FEDERAL tax return

FEDERAL INCOME TAX INFORMATION			SOCIAL SECURITY INFORMATION		Marital status
Federal income tax withheld	Wages paid subject to withholding in 1971 *	Other compensation paid in 1971 *	F.I.C.A. employee tax withheld *	Total F.I.C.A. wages paid in 1971 *	1. Single 2. Married
60,667.44	250,000.00				2

EMPLOYEE'S social security number

Name of State	State Form No.	State income tax withheld
Name of City	City Form No.	City income tax withheld

The Honorable Richard Nixon
The White House
Washington, D. C. 20500

Type or print EMPLOYEE'S name and address (including ZIP code) above.

Uncollected Employee Tax on Tips . . . $

Form W-2 Department of the Treasury, Internal Revenue Service

Page 2 Form 1040 (1971) — Attach Copy B of Form W-2 here

PART I.—Additional Exemptions (Complete only for other dependents claimed on line 10)

33 Total number of dependents listed above. Enter here and on line 10

PART II.—Income other than Wages, Dividends, and Interest

34 Business income or (loss) (attach Schedule C)	34	
35 Net gain or (loss) from sale or exchange of capital assets (attach Schedule D)	35	
36 Net gain or (loss) from Supplemental Schedule of Gains and Losses (attach Form 4797)	36	
37 Pensions and annuities, rents and royalties, partnerships, estates or trusts, etc. (attach Schedule E)	37	(5,11[illegible] 39)
38 Farm income or (loss) (attach Schedule F)	38	
39 Miscellaneous income (a) Fully taxable pensions and annuities		
(b) 50% of capital gain distributions (not reported on Schedule D)		
(c) State income tax refunds (caution—see instructions on page 7)		
(d) Alimony		
(e) Other (state nature and source) BOOK ROYALTIES 367 05		
(f) Total miscellaneous income (add lines 39(a), (b), (c), (d) and (e))	39	367 05
40 Total (add lines 34, 35, 36, 37, 38, and 39). Enter here and on line 15	40	([illegible] 39)

PART III.—Adjustments to Income

41 "Sick pay" if included in line 12 (attach Form 2440 or other required statement)	41	
42 Moving expense (attach Form 3903)	42	
43 Employee business expense (attach Form 2106 or other statement)	43	
44 Payments as a self-employed person to a retirement plan, etc. (attach Form 2950SE)	44	
45 Total adjustments (add lines 41, 42, 43, and 44). Enter here and on line 17	45	

PART IV.—Tax Computation (Do not use this part if you use Tax Tables 1–13 to find your tax.)

46 Adjusted gross income (from line 18)	46	262,384 75
47 (a) If you itemize deductions, enter total from Schedule A, line 32 and attach Schedule A. (b) If you do not itemize deductions, and line 46 is: (1) $10,000 or more but less than $11,538.43, enter 13% of line 46. (2) $11,538.43 or more, enter $1,500. Note: deduction under (1) or (2) is limited to $750 if married and filing separately.	47	255,676 69
48 Subtract line 47 from line 46	48	6,708 06
49 Multiply total number of exemptions claimed on line 11, by $675	49	1,350 00
50 Taxable income. Subtract line 49 from line 48	50	5,358 06

(Figure your tax on the amount on line 50 by using Tax Rate Schedule X, Y or Z, or if applicable, the alternative tax from Schedule D, income averaging from Schedule G, or maximum tax from Form 4726.) Enter tax on line 19.

PART V.—Credits

51 Retirement income credit (attach Schedule R)	51	
52 Investment credit (attach Form 3468)	52	
53 Foreign tax credit (attach Form 1116)	53	
54 Total credits (add lines 51, 52, and 53). Enter here and on line 20	54	

PART VI.—Other Taxes

55 Self-employment tax (attach Schedule SE)	55	
56 Tax from recomputing prior year investment credit (attach Form 4255)	56	
57 Minimum tax (see instructions on page 8). Check here X if Form 4625 is attached	57	— 0 —
58 Social security tax on unreported tip income (attach Form 4137)	58	
59 Uncollected employee social security tax on tips (from Forms W-2)	59	
60 Total (add lines 55, 56, 57, 58, and 59). Enter here and on line 22	60	— 0 —

PART VII.—Other Payments

61 Excess FICA tax withheld (two or more employers—see instructions on page 8)	61	
62 Credit for Federal tax on special fuels, nonhighway gasoline and lubricating oil (attach Form 4136)	62	
63 Regulated Investment Company Credit (attach Form 2439)	63	
64 Total (add lines 61, 62, and 63). Enter here and on line 26	64	

Schedules A&B—Itemized Deductions AND Dividend and Interest Income

(Form 1040) — 1971

Department of the Treasury, Internal Revenue Service

▶ Attach to Form 1040.

Name(s) as shown on Form 1040: Richard M. and Patricia R. Nixon

Schedule A—Itemized Deductions (Schedule B on back)

Medical and dental expenses (not compensated by insurance or otherwise) for medicine and drugs, doctors, dentists, nurses, hospital care, insurance premiums for medical care, etc.

1 One half (but not more than $150) of insurance premiums for medical care. (Be sure to include in line 10 below)
2 Medicine and drugs
3 Enter 1% of line 18, Form 1040
4 Subtract line 3 from line 2. Enter difference (if less than zero, enter zero)
5 Enter balance of insurance premiums for medical care not entered on line 1
6 Itemize other medical and dental expenses. Include hearing aids, dentures, eyeglasses, transportation, etc.
7 Total (add lines 4, 5, and 6)
8 Enter 3% of line 18, Form 1040
9 Subtract line 8 from line 7. Enter difference (if less than zero, enter zero)
10 Total deductible medical and dental expenses (Add lines 1 and 9. Enter here and on line 27, below.) ▶

Taxes.
11 Real estate
12 State and local gasoline (see gas tax tables)
13 General sales (see sales tax tables)
14 State and local income
15 Personal property
16 Other
17 Total taxes (Add lines 11 through 16. Enter here and on line 28, below.) ▶ SCHEDULE

Contributions.—Cash—including checks, money orders, etc. (Itemize—see instructions on page 10 for examples)

18 Total cash contributions
19 Other than cash (see instructions on page 10 for required statement). Enter total for such items here
20 Carryover from prior years
21 Total contributions (Add lines 18, 19, and 20. Enter here and on line 29, below.) SCHEDULE

Interest expense.
22 Home mortgage
23 Installment purchases
24 Other (itemize)
25 Total interest expense (Add lines 22, 23, and 24. Enter here and on line 30, below.) ▶ SCHEDULE

Miscellaneous deductions for child care, alimony, union dues, casualty losses, etc. (see instructions on page 10).

26 Total miscellaneous deductions (Enter here and on line 31, below.) ▶ SCHEDULE

Summary of Itemized Deductions — A

27 Total deductible medical and dental expenses (from line 10)	
28 Total taxes (from line 17)	15,163.18
29 Total contributions (from line 21)	131,498.37
30 Total interest expense (from line 25)	62,003.48
31 Total miscellaneous deductions (from line 26)	33,332.89
32 TOTAL ITEMIZED DEDUCTIONS (Add lines 27 through 31. Enter here and on Form 1040, line 47.) ▶	[illegible] 676.49

94-460

Schedules E&R—Supplemental Income Schedule AND Retirement Income Credit Computation

(Form 1040) — 1971

Department of the Treasury, Internal Revenue Service

(From pensions and annuities, rents and royalties, partnerships, estates and trusts, etc.)

▶ Attach to Form 1040.

Name(s) as shown on Form 1040: Richard M. and Patricia R. Nixon

Schedule E—Supplemental Income Schedule (Schedule R on back)

Part I Pension and Annuity Income. If fully taxable, do not complete this part. Enter amount on Form 1040, line 39(a). For each pension or annuity not fully taxable, attach a separate Part I and enter combined total of taxable portions on line 5.

1 Name of payer
2 Did your employer contribute part of the cost? ☐ Yes ☐ No. If "Yes," is your contribution recoverable within 3 years of the annuity starting date? ☐ Yes ☐ No.
If "Yes," show: Your contribution $______, Your contribution recovered in prior years $______
3 Amount received this year
4 Amount excludable this year
5 Taxable portion (subtract line 4 from line 3)

Part II Rent and Royalty Income.

1 Totals ▶ SCHEDULE
2 Net income or (loss) from rents and royalties (column (b) plus column (c) less columns (d) and (e)) — (571[illegible]34)

Part III Income or Losses From Partnerships, Estates or Trusts, and Small Business Corporations.

3 Income or (loss) Total of column (d)

TOTAL OF PARTS I, II, AND III (Enter here and on Form 1040, line 37) — (571[illegible]34)

Explanation of Column (e), Part II

Schedule for Depreciation Claimed in Part II Above.

1 Total additional first-year depreciation (do not include in items below)
2 Depreciation from Form 4832
3 Other depreciation: SCHEDULE — 877.60
4 Totals — 877.60

Summary of Depreciation (Other Than Additional First Year Depreciation)

3 Totals — 877.60 — 877.60

A-740

Name and address Richard M. and Patricia R. Nixon

YEAR 19 71

Schedule 1

RENTS AND ROYALTIES

Description of property	WHITTIER SINGLE DWELLING				
INCOME	$ 600.00	$	$	$	$
EXPENSES:					
Commissions					
Depreciation (Schedule 4)	818.60				
Depletion					
Garbage disposal					
Insurance	178.00				
Interest	3017.39				
Repairs					
Salaries					
Taxes	2291.16				
Utilities	10.19				
Other					
Total expenses	$ 6315.34	$	$	$	$
Net Income—Loss*	($ 5715.34)	$	$	$	$

Total Net Income—Loss* (This schedule) ($ 5715.34)

A-741

Name and address Richard M. and Patricia R. Nixon

Schedule 4

DEPRECIATION

YEAR 19 71

No	Description of Property	Date acquired	Cost or other basis	Previous depreciation	Method used	Estimated life (yrs.) or rate (%)	Remaining life (yrs.)	Depreciation allowable this year
1	SINGLE DWELLING	1-59*	$ 8186.09	$ 1637.70	SL	10 YEARS		$ 818.60
2								
3								
4								
5	* CONVERTED TO							
6	RENTAL -							
7	30 YEARS OLD							
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
	Totals		$	$				$ 818.60

Name and address: Richard M. and Patricia R. Nixon

Schedule 4

DEPRECIATION

YEAR 19 71

No	Description of Property	Date acquired	Cost or other basis	Previous depreciation	Method used	Estimated life (yrs.) or rate (%)	Remaining life (yrs.)	Depreciation allowable this year
1	(1) SAN CLEMENTE	7-69	$ 36044 41	$ 7004 03	150% DB	25 YEARS		$ 7032 49
2	PROPERTY							
3	25% USE FOR BUSINESS							
4								
5	PAVING	4-71	1148 00	-0-	SL	25 ✓		34 44
6								
7	FURNITURE	7-69	13149 23	3383 70	150% DB	8 ✓		1831 11
8	✓	1970	816 06	153 00	150% DB	8 ✓		124 32
9							(1)	4021 36
10	(2) FLORIDA RESIDENCE	1-1-69*	64366 66	5300 62	150% DB	30 ✓		
11	500 BAY LANE							2949 75
12								
13	IMPROVEMENTS	1969-70	27942 84	7859 49	150% DB	30 ✓		1754 13
14							(2)	4703 88
15								
16	(3) WHITE HOUSE OFFICE							
17	FURNITURE							
18	VARIOUS	1970	7186 96	1347 36	150% DB	8 ✓	(3)	1094 73
19								
20								
21								
22								
23								
24								
25								
26								
27								
28	* CONVERTED TO 100% BUSINESS USE							
	Totals		$ 150652 86	$ 15048 20				$

Schedules A & B (Form 1040) 1971 Page 2

Schedule B—Dividend and Interest Income

Name(s) as shown on Form 1040 (Do not enter name and social security number if shown on other side): Richard M. and Patricia R. Nixon

Your social security number

Part I Dividend Income

Note: If gross dividends (including capital gain distributions) and other distributions on stock are $100 or less, do not complete this part. But enter gross dividends less the sum of capital gain distributions and nontaxable distributions, if any, on Form 1040, line 11a. (See note below)

1 Gross dividends (including capital gain distributions) and other distributions on stock. (List payers and amounts—write (H), (W), (J), for stock held by husband, wife, or jointly)

2 Total of line 1

3 Capital gain distributions (see instructions on page 13). Enter here and on Schedule D, line 7 ; See note below

4 Nontaxable distributions (see instructions on page 13)

5 Total (add lines 3 and 4)

6 Dividends before exclusion (subtract line 5 from line 2). Enter here and on Form 1040, line 11a

Note: If you received capital gain distributions and do not need Schedule D to report any other gains or losses or to compute the alternative tax, do not file that schedule. Instead, enter 50 percent of capital gain distributions on Form 1040, line 39(b).

Part II Interest Income

Note: If interest is $100 or less, do not complete this part. But enter amount of interest received on Form 1040, line 14.

7 Interest includes earnings from savings and loan associations, mutual savings banks, cooperative banks, and credit unions as well as interest on bank deposits, bonds, tax refunds, etc. Interest also includes original issue discount on bonds and other evidences of indebtedness (see instructions on page 13) (List payers and amounts)

SCHEDULE 17733 04

8 Total interest income. Enter here and on Form 1040, line 14: 17733 04

B

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A-744

A-745

94-4605

INTEREST INCOME

YEAR 1971

NAME Richard M. and Patricia R. Nixon SOC SEC #

INTEREST PAYER	H W J	SAVINGS & LOAN CREDIT UNIONS $		OTHER BANKS, BONDS ETC. $	
KEY BISCAYNE BANK				10580	26
KEY BISCAYNE BANK				7337	38
BANKERS TRUST COMPANY				56	94
MANUFACTURERS HANOVER TRUST CO				47	07
KEY BISCAYNE BANK				5	5
UNITED CALIFORNIA BANK				5	34
TOTALS				177[illegible]	64

SCHEDULE OF EXHIBIT A

Name Richard M. and Patricia R. Nixon

Social Security or Identification No.

Address

Form Schedule Line

Year 1971

EXHIBIT B - Miscellaneous

(1) PROFESSIONAL - ABRAHAM LINCOLN BOOK SHOP, APPRAISAL OF PRESIDENTIAL PAPERS DONATED TO THE NATIONAL ARCHIVES OF THE UNITED STATES	6709.09
(2) PROFESSIONAL - TAX RETURN PREPARATION FEES (ARTHUR BLECH)	4[illegible]5.60
(3) EXPENSES INCURRED IN THE PERFORMANCE OF OFFICIAL FUNCTIONS AS PRESIDENT OF THE UNITED STATES OF AMERICA	11 46[illegible].[illegible]8
(4) WHITE HOUSE OFFICE EQUIPMENT DEPRECIATION (SCHEDULE 4A)	[illegible]09[illegible].73
(5) EXHIBIT A-1, SAN CLEMENTE EXPENSES	10 73[illegible].40
(6) EXHIBIT A-1, 500 BAY LANE EXPENSES (FLORIDA)	6130.39
(7) PROFESSIONAL DUES	[illegible]5.00
TOTAL - TO EXHIBIT B - MISCELLANEOUS	39 3[illegible].29

SCHEDULE OF
EXHIBIT A-1

Name: Richard M. and Patricia R. Nixon

Address

Social Security or Identification No.

Form ____ Schedule ____ Line ____

Year 1971

Expenses incurred in connection with the use of residences for official government functions.	San Clemente	Florida 500 Bay Lane
	25%	20%
DEPRECIATION - SCHEDULE 4A	40322 36	42407 38
UTILITIES	12046 76	11180 13
INSURANCE	[illegible]900 00	3448 88
HOUSEHOLD MAINTENANCE	[illegible]664 64	
HOUSEHOLD HELP	14,9[illegible]00	
PAYROLL TAXES	1398 88	
TOTAL	104374 0	61130 39

94-4505

Form 4625
Department of the Treasury
Internal Revenue Service

Computation of Minimum Tax

Attach to Form 1040

For the year January 1–December 31, 1971, or other taxable year beginning ____ 1971, ending ____ 19__

1971

Name(s) as shown on Form 1040: Richard M. and Patricia R. Nixon

Your social security number

1 Items of Tax Preference. File this form if the total items of tax preference (line 2) is more than $15,000 even though there is no minimum tax due. If short period return, see instructions for line 3. Caution: See "Limitations on amounts treated as items of tax preference in certain cases" in instructions		
(a) Excess investment interest	16607	17
(b) Accelerated depreciation on real property: (1) Low-income rental housing under sec. 167(k)		
(2) Other real property	1730	83
(c) Accelerated depreciation on personal property subject to a net lease		
(d) Amortization of certified pollution control facilities		
(e) Amortization of railroad rolling stock		
(f) Stock options		
(g) Reserves for losses on bad debts of financial institutions		
(h) Depletion		
(i) Capital gains		
2 Total items of tax preference (add lines 1(a) through 1(i))	18338	00
3 Exclusion. Enter $30,000. If married filing separately or "certain married individuals living apart," enter $15,000	30 000	00
4 Subtract line 3 from line 2	-0-	
5 Amount from Form 1040, line 23		
6 Amount from Form 1040, line 58		
7 Tax carryover from prior year(s)		
8 Add lines 5, 6 and 7		
9 Subtract line 8 from line 4	-0-	
10 Multiply amount on line 9 by .10 and enter result	-0-	
11 Enter amount of 1971 net operating loss which is a carryover to 1972, if any (attach statement showing computation)		
12 Multiply amount on line 11 by .10 and enter result		
13 Deferred minimum tax—enter amount from line 10 or line 12, whichever is smaller		
14 Minimum Tax. Subtract line 13 from line 10	-0-	
15 Enter minimum tax deferred from prior year(s) until this year (attach statement showing computation)		
16 Total minimum tax. Add lines 14 and 15	-0-	
If you had no retirement income (see Schedule R, lines 5(a) and 5(b)), omit lines 17 through 20. Enter amount from line 16 above on line 21 below.		
17 Amount from Schedule R, line 8		
18 Amount from Schedule R, line 10 or from line 13, whichever is applicable		
19 Subtract line 18 from line 17		
20 Enter amount from line 19 or line 16, whichever is smaller		
21 Subtract line 20 from line 16. Enter here and on Form 1040, line 57	-0-	

94-4605

Name and address Richard M. and Patricia R. Nixon

Year 19 71

ITEMIZED DEDUCTIONS

Exhibit B

CONTRIBUTIONS:

SCHEDULE C - ATTACHED	131192 37
Total	$131192 37

INTEREST:

HALFINCKEL + CO	$1 24
GATE FLORIDA DEVELOP CO	7847 62
COTTON OGDEN	38045 12
ROBERT H. ABPLANALP	15000 00
CHOLWILL INC.	1993 34
FIRST FLORIDA S/L	2466 22
GREATER MIAMI FED S/L	6570 68
Total	$67003 26

TAXES:

Property—city COUNTY	$17635 18
—state	
Personal property	19 00
Sales—state and/or city	460 00
Gasoline—state	49 00
State income	
Total	$18163 18

MEDICAL EXPENSES:

Drugs $

Less 1% of adjusted gross income

Net drugs if under 65

Other medical expenses:

Total (not compensated by insurance or otherwise)

Less 3% of adjusted gross income, if under 65

Allowable medical expenses $

CHILD CARE (OR CERTAIN OTHER DEPENDENTS) EXPENSES:

$

$

CASUALTY OR THEFT LOSSES:

$

$

MISCELLANEOUS:

EXHIBIT A - ATTACHED	$3932 27
Total	$3932 27

SUMMARY

Total for federal $ [illegible]

Add

Deduct $

Total for state $

SCHEDULE OF EXHIBIT C

Name Richard M. and Patricia R. Nixon

Social Security or Identification No.

Address

Form — Schedule — Line

Year 1971

EXHIBIT B - Charitable Contributions

TOTAL CASH CONTRIBUTIONS, EXHIBIT C-1	[illegible]	
CONTRIBUTIONS CARRYOVER FROM 1970	[illegible]	
TOTAL	319266 27	
CONTRIBUTION LIMITATION		
CONTRIBUTIONS SUBJECT TO 50% LIMITATION (CODE SECTION 170 AS AMENDED BY TRA 1969)	319266 27	
50% OF ADJUSTED GROSS INCOME	131192 37	131192 37
NONDEDUCTIBLE CONTRIBUTIONS	188073 90	
DEDUCTIBLE CONTRIBUTIONS - TO EXHIBIT B		131192 37

SCHEDULE OF
EXHIBIT C-1

Name Richard M. and Patricia R. Nixon
Address

Social Security or Identification No.
Form Schedule Line
Year 1971

1971 Cash Charitable Contributions

BOYS CLUB OF AMERICA	500 00
EAST WHITTIER FRIENDS CHURCH	1,000 00
AMERICAN LEGION AUXILIARY	12 00
WHITTIER COLLEGE ASSOCIATES	90 00
AMERICAN LEGION AUXILIARY	15 00
HEART RESEARCH FUND	100 00
DUKE UNIVERSITY LOYALTY FUND	100 00
UNITED NEGRO COLLEGE FUND	100 00
EISENHOWER MEDICAL CENTER	200 00
D.C. TUBERCULOSIS AND RESP. ASSN	10 00
1970 CONTRIBUTION VOIDED - VCLA ALUMNI ASSN	<50 00>
TOTAL CASH CONTRIBUTIONS - 1971	2,[illegible]24 00

94-4

Exhibit XI - 4

December 13, 1973

CERTIFICATION

I hereby certify that the attached is a true copy of the original joint federal income tax return of Richard M. and Patricia R. Nixon which was filed with the Internal Revenue Service for the period ending December 31, 1972.

Raymond F. Harless
Raymond F. Harless
Deputy Commissioner
of Internal Revenue