<b>8</b> ⋈		spouse or dependents on Ethics.	"unearned" income, transactions, or liabilities of a spouse or unless you have first consulted with the Committee on Ethics	med" income, tra	er assets, "unea wer "yes" unless	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
× ×	Yes	usts" need not be	d certain other "excepted truse, or a dependent child?	ttee on Ethics an	d by the Commi a trust benefiti	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?
<u>v</u>	ANSWER EACH OF THESE QUESTIONS	EACH OF TH	1	INFORMA	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	Yes" response.	attached for each "Yes" response.	(0)	and the app	e answered	Each question in this part must be answered and the appropriate schedule
No X	om Yes	nsation of more than \$5,000 from prior years? th Schedule VI.	VI. Did you receive compensation of more a single source in the two prior years? If yes, complete and attach Schedule VI.	No Si a si	Yes X	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.
N <sub>S</sub>	™ Yes X	able agreement or arrangement	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V	No Witt	Yes X	II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.
No U	date Yes X	sitions on or before the it or in the prior two year adule IV.	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	No V	Yes X	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?  If yes, complete and attach Schedule I.
			QUESTIONS	OF THESE (	ER EACH (	In all sections, please type or print clearly in blue or black ink.  PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
7110	more than 30 days late.	more			Office:	Status New officer or Employing Office:
assessed	ן עור	Check if A \$2	May 20, 2014 Ch	Date of M	11	Filer X Candidate for the State: GA House of Representatives District:
	(Office Use Only)	O.C.				
TIVES		9.5.1	lephone:	Daytime Telephone		Name: Barry Dean Loudermilk
Page 1 of 5 ENTER	Page 1. LEGISLATIVE RESOURCE CENTER 2014 FEB 26 PM 1: 00	new employees	FORM B For use by candidates and new o	For L	ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - April 30, 20

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name barry Dean Loudermilk

Page 2 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Course (include data of maniet for homographs)	Type	Amount	unt
Course (money date of teceph to the relative)	. )	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
_	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Innovative Network Systesm, Inc., Cartersville, GA	Salary	\$16,700	\$40,750
Georgia General Assembly, Atlanta GA	Legislative Salary	\$7,225	\$17,341
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		Hamilton	Freedom	Greater	Fast F		Examples:		Exclude: Your persons homes and vacation he income during the reporting \$5,000 or less in accounts; and any finderly from, a federal the Thrift Savings Plan. If you so choose, you income source is that to lent child (DC) or is join in the optional column of the mention of the instance	that is not publicly ness, the nature o location in Block A.	an ownerst	rentaloro wide a com ntalproperty	r all IRAs an ns) provide count that ex	Provide complete names o (do not use ticker symbols).	intify (a) each income with end of the cortable asserted we than \$200	Asset	
		t o			Pencil			SP	persuation he repless and he repless and he say any series of its repless any series of its repless and he in the interval of its repless and he interval of its representation and he interval of its re	> 8 8	ð Ð	end and	2860 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	er sy	a fair	and	
		n State Bank	Flight Center, LLC	Heights Design	cil Inc.	1st Bank of Paducah, KY accounts	Simon & Schuster	Mega Corp. Stock	Exctude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (CC) or is jointly held with your spouse (JT), in the optional column on the far left.  For a detailed discussion or Schedule II requirements, please refer to the instruction booldet.	that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For an ownership interest in a privately-held business	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source	BLOCK A
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┢			×		Н	Ŀ	=	_	\$1 - \$1,000		<u>m</u>	"This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report- ing year and is included only because	indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.		
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									DIVIDENDS			during the reporting period.	If reinvested, must be dis- closed as income. Check "Vone" If the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column. Dividends, Interest, and capital pains, even	Check all columns that apply. For retrement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k)	4	1
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		I			]		1	•	Spouse/DC Income over \$1,000,000*	¥		1	<u> </u>	i	ゅっぱん		

#### SCHEDULE III — LIABILITIES

Name Barry Dean Loudermilk

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ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sib-Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount

				4 C S
		Hamilton State Bank	Example: First Bank of Wilmington, DE	Creditor
		4/10	May 1998	Date Liability Incurred mo/year
		Business Loan, Innovative Network Systems (Personal Guarantee)	Mortgage on 123 Main Street, Dover, DE	
s:	. ,			\$10,001— \$15,000
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				Over \$50,000,000
				Spouse/DC Liability over ス \$1,000,000

#### **SCHEDULE IV — POSITIONS**

any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

and positions solely of an honorary nature. **Exclude:** Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

and pooluono ocidiy of an individiry flatteres.	MINITY:
Position	Name of Organization
Officer (President)	Innovative Network Systems, Inc.
Officer (CEO)	Firm Reliance, Inc.
Parnter	Freedom Flight Center, LLC
Officer (Secretary)	Barley Loaf Ministries, Inc.

### SCHEDULE V — AGREEMENTS

Name Barry Dean Loudermilk

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Date	Parties To	Terms of Agreement
Vested 2013	Vested 2013 Myself and State of Georgia	Georgia State Health Benefit Plan

# SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services