|  |   |                            |   |  | AND                       |  |  |  |  |
|--|---|----------------------------|---|--|---------------------------|--|--|--|--|
| UNITED STATES HOUSE OF REPRESENTATIVES<br>2013 FINANCIAL DISCLOSURE STATEMENT  | For Use by Members, Officers, and Employees |                            | DELI  | VERED., <u>2</u>                                 |                           |  |  |  |  |
| Name: RiUnard Hudson Daytime Telephone:  |   |                            |   | EGISLATIVE RES<br>2014 AUG   1<br>(Office        | ,                         |  |  |  |  |
| FILER STATUS  Member of or Candidate for State: U.S. House of Representatives  District:   |   | Office<br>Emplo            |   | • OFFICE OF T<br>S MOUSE OF RE                   | HE CLERK<br>PRESENTATIVES |  |  |  |  |
| REPORT TYPE 2013 Annual (Due: May 15, 2014)  | Amendment                                   |                            | Termination   | n Date:  |                           |  |  |  |  |
| PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS   |   |                            |   |  |                           |  |  |  |  |
| A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in uneamed income from any reportable asset during the reporting period? | No 🗌  |                            | he reporting period or i  | r arrangement with an<br>in the current calendar | Yes No                    |  |  |  |  |
| B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?  Yes   | No  |                            | ise, or your dependent<br>ing more than \$350 in sorting period?            |  | Yes No                    |  |  |  |  |
| C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?   | No  | reportable travel or re    | ise, or your dependent<br>imbursements for trave<br>single source during th | el totaling more than                            | Yes No                    |  |  |  |  |
| D. Old you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?  | No  |                            | r organization make a<br>a speech, appearance                               |  | Yes No No                 |  |  |  |  |
| E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?  | _ No [X]                                    | ATTACH THE C               | ORRESPONDIN   | G SCHEDULE IF YO                                 | OU ANSWER "YES"           |  |  |  |  |
| IPO, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS   |   |                            |   |  |                           |  |  |  |  |
| IPQ - Did you purchase any shares that were allocated as a part of an initial Public O the Committee on Ethics for further guidance.   | uestion, please contact                     | Yes No K                   |   |  |                           |  |  |  |  |
| TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on E this report details of such a trust that benefits you, your spouse, or dependent child?   | thics and certain oth                       | ner "excepted trusts" ne   | ed not be disclosed. H  | lave you excluded from                           | Yes No 💢                  |  |  |  |  |
| <b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" incortests for exemption? Do not answer "yes" unless you have first consulted with the Co   |   | liabilities of a spouse or | r dependent child beca  | use they meet all three                          | Yes No 🗜                  |  |  |  |  |

## SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

| Name: RYMAND HUDSON | Page 2 of 2 |
|---------------------|-------------|
|---------------------|-------------|

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk; travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

|           | Source  | Date(s)     | City of Departure Destination<br>City of Return | Lodging?<br>(Y/N) | Food?<br>(Y/N) | Family Member<br>Included? (Y/N) |
|-----------|---|-------------|---|-------------------|----------------|----------------------------------|
|           | Government of Chara (MECSA)                           | Ap.6-11     | DC-Brijng ChreOC                                | Y                 | Y              | N                                |
| Examples: | Habitat for Humanity (charity fundament)              | Mar 3-4     | DC-Boulon-DC                                    | Y                 | Y              | Y                                |
| The       | Heritage Foundation<br>an Israel Education Foundation | Feb 6-8     | DC-Rattimone-DC<br>DC-TELAVIV-DC                | Υ                 | У              | У.                               |
| AMOVIC    | an Israel Education Foundation.                       | Aug 10 - 20 | DC-TELNIV-DC                                    | 4                 | Ý              | <u> </u>                         |
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|           |   |             | <u> </u>  |                   | <u> </u>       |                                  |