	j	;			-	
<u>₹</u>	Y ₀₈	pendent child	s, transactions, or liabilities of a spouse or depost consulted with the Committee on Ethics.	arned" income is you have fi	er assets, "une: wer "yes" unles	EXEMPTION —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.
₹	₩	ot be	s and certain other "excepted trusts" need not spouse, or a dependent child?	nittee on Ethic	d by the Comm	TRUETS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclossed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?
S	QUESTIONS)F THESE (MATION — ANSWER EACH OF THESE	TINFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" r	appropriate schedule attached for each "Yes" response	and the a	e answered	Each question in this part must be answered and the appropriate sched
₹ ₩	Ye The	\$5,000 from	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	×	Y ₈₈ □	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If you, complete and attach Schedule III.
₹ ⊠	ĕ	rangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	\$ 	¥ 88	ii. Did you, your spouse, or a dependent child receive "uneamed" incerns of more than \$200 in the reporting period or hold any rigorithtle asset worth more than \$1,000 at the end of the period? iii you, complete and attach Schedule II.
⊠	™	xefore the date or two years?	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.	⊠	₫	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 year, complete and attach Schedule I.
			ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	PRELIMINARY INFORMATION — ANSW
						in all sections, plume type or print clearly in blue or black ink.
assessed. who files	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 penalty shall be against any individual more than 30 days late	Date of Check if Election: May 19 200 Amendment	Date of Election	27 Office:	Filer Candidate for the State: 12x House of Representatives District: 3 New officer or Employing Office:
NRCE CENTER N 3: 35	LEGISLATIVE RESOURCE CENTER 2012 APR 13 PM 3: 35 U.S. HOMES CONFERENCE OF THE CLERK	13 21 LEI	Daytime Telephone: ' · · ·	Dayilme		Name: JOHN LAUNUALL)
2 2 2 2	APR 1 2 2012	APR 1	FORM B For use by candidates and new employees	(ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period govered: January 1, 2012 MARCH 31, 2

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SP DWS GROWTH TUNDS	SP CAPITAL CLE	OP BANK of AMERICA	WELLS FARAD ACCUTS	STOCKS	PRINC: PAL KINANGAL	JT tst Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	Exclude: 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 (DC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic tocation in Block A.	account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address.	BLOCK A Asset and/or Income Source 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. Provide complete names of stocks and mutual funds (do not use ticker symbols). For all IFAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the
× ×	*	*	*		*	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000		A B C D E F G H I J K	BLOCK B Value of Asset 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. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
TYSTRIBONO	*	*	X	**		×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: e.g., Partnership Income or Fa	BLOCK C Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deterred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.		
	*	*	<i>X X X X X X X X X X</i>	**	×	×	×	*	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Current Year Preceding Year	Amount of Income For retirement accounts that do not allow you to choose specific investments <u>or</u> that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John GRUNNALD

Page 3 of 3

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		WHILLIAME	THE CLEBACE HOLD	TRA FRERZING	IRACOUT FUNDS	157 & 3400 LX	TRACK RECT MARK	TRA FUNDY	MATIONICI DE RETIDENE		Asset and/or Income Source	BLOCK A
		X		**			~	~	*	None \$1 - \$1,000	Value of Asset	вгоск в
		25 16 16 11 11 11 11 11 11 11 11 11 11 11							Desta no	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Type of Income	. BLOCK C
		7 -								None	Amount of Income	BLOCK D
										None	of Income	OK D

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