8 ∑	Yes]	pendent child	ilities of a spouse or de	"unearned" income, transactions, or liabilities of a spouse or dependent child unless you have first consulted with the Committee on Ethics	arned" income	er assets, "une wer "ves" unle	EXEMPTION —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	EXEMPTION—
N _o	Yes 🔲	ot be	cepted trusts" need nont child?	ട and certain other "ex spouse, or a depender	nittee on Ethic ting you, your	d by the Comn n a trust benefi	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?	TRUSTS—Detaidisclosed. Have
Ø	QUESTION)F THESE (ANSWER EACH OF THESE QUESTIONS	1	T INFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION
	esponse.	each "Yes" r	lule attached for each "Yes" response.	appropriate sched	and the a	e answerec	Each question in this part must be answered and the appropriate sched	
§	Yes	\$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.	VI. Did you receive compensation of more a single source in the two prior years? If yes, complete and attach Schedule VI	₹ <u>X</u>	Yes	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.	III. Did you, your s able liability (more If yes, complete a
N _O	Yes	rangement	portable agreement or arrangement ttach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V.	<u>s</u>	se Z	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.	II. Did you, your sincome of more the reportable asset will yes, complete a
N _O	Yes X	xefore the date xr two years?	you hold any reportable positions on or before the date in the current calendar year or in the prior two years? complete and attach Schedule IV.	IV. Did you hold any rep of filing in the current cal If yes, complete and at	S S	Yes	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.	I. Did you or your fees) of \$200 or m if yes, complete a
				ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	PRELIMINARY INFORMATION — ANSWI	PRELIMINA
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assessed who files		A <i>\$200 penalty</i> shall b against any individual more than 30 days late	Check if Amendment	# a014	Date of Election:	35	e for the Representatives er or	Filer Status
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3 00 A	2013 JUN -6 PM 2: 00	2013 J		Daytime Telephone:	Daytime	37	atherine M. Clark	Name: 大
Page 1 of	MAY 2 9 2013.	MAY 2	∄ B and new employees	FORM For use by candidates <i>a</i>		NTIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 かなり えるい	UNITED STA

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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Kathenne
m.Cark
Page A of _

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.

Excused: minut) buy (seen as transition seems of trassition buy), isseem tell enter brogiants, and t		ellells leceived utilder tile oddial oedditty Adt.	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
e e e e e e e e e e e e e e e e e e e	1)	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust, Houston, TX	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
Commonwealth of MA	Salaru	\$23,165	\$66,912.35
Lawyer's Concerned for Lawyer's Roston MA		ZA	ZA.
Concord Law School Salary Spouse	Salary Spouse	NA	とみ
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· POR DIVIS PHOTOS	LPL Financial	Judith Clark Irrawaka IR	CO PERA	Vanguary Inshit Find	CO PERA 401(K) Non	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	For rental or other real property held for investment, provide a complete address. 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 location in Block A. Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> there was rental income during the reporting period); any deposits totaling \$5,000 or tess 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 II requirements, please refer to the instruction booklet.	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 IRAs 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 account and its value at the end of the reporting period.
	<i>y</i>	×	×		*	×	Indefinite	×	\$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$1,000,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000	Value of Asset Value of Asset cate value of asset at close sporting year. If you use a ation method other than fair ket value, please specify the hod used. asset was sold during the orting year and is included because it generated me, the value should be ne."
	× ×	×	×		×	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" 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.
	×	**	×		×		X	×	None	Amount of Inco For assets for which you Deferred" in Block C, you r "None" column. For all other a the category of income by appropriate box below. Divid and capital gains, even if rei be disclosed as income. Che income was earned or genera

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Katherine M. Clark Page 4 of

Continuation Sheet (if needed)

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SCHEDULE III — LIABILITIES

Name Katherine M. Clark Page 6 of

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 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.

JT DC, SR	
Creditor Example: First Bank of Wilmington, DE	
Liability Incurred mo/year May 1998	Date
Type of Liability Mortgage on 123 Main Street, Dover, DE	
\$10,001— \$15,000	
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SCHEDULE IV — POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, 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 offi-

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 positions oddly of an inchidiary materia.	
Position	Name of Organization
Corporator	The Javinss Bank Wakefield MA
Advisory Poord Member	Advisory Board Member MA Early Education and Care Advisory Board
Adulisory Asord Munday	Abuisary Asard Munday The Center for Warner and Fairth as UMASS Baston

SCHEDULE V — AGREEMENTS

hame Katherine
M.
Clark
Page 7 of 7

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
Veska 2010	myself + Commonwealth of MA ste employee pension plan	the employee pension plan
indefinite	myself + State of Colorado	indefinite myself + State of Colorado State employee pension plan
		-
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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.

GPO: 2012 72-584 (mac)