dent child?				
"excepted trusts" need not be	cs and certain other "exc r spouse, or a dependent	mittee on Ethic iting you, your	rusts" approved by the Comdetails of such a trust benef	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a depen
NSWER EACH OF THESE QUESTIONS	- A	T INFOR	ENDENT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
edule attached for each "Yes" response	appropriate schedu	ป and the a	art must be answere	Each question in this part must be answered and the appropriate sch
pensation of more than \$5,000 prior years? ach Schedule VI.	VI. Did you receive comp a single source in the two if yes, complete and attr	<u>8</u>	any report- g period? 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.
ortable agreement or arrangemach Schedule V.	V. Did you have any repo with an outside entity? If yes, complete and atta	<u>s</u>	ve "unearned" hold any of the period? Yes	 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.
ortable positions on or before the endar year or in the prior two years.	IV. Did you hold any repo of filing in the current cale if yes, complete and attu	No O	g., salaries or ng period? 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.
	SE QUESTIONS	OF THES	- ANSWER EACH	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSW
mon mon			Employing Office:	New officer or employee
Check if A \$,	Date of Election	State: <u>NC</u> District:	Filer X Candidate for the House of Representatives
	Telephone:	Daytime		Name: DAVID ROWZER
B nd new employees	FORM For use by candidates ar		PRESENTATIVES MENT APRIL 30, 2013	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - Afrail 30, 20
2013 MAY 28 AM II: 59 (Office Use Only) 200 penalty shall be assessinst any individual who fill re than 30 days late. he date rears? Yes Mean No Dears? No Means No	A & aga mor	Check if Amendment Amendment Amendment Amendment Amendment Amendment aga reportable positions on or before the calendar year or in the prior two years attach Schedule V. Sompensation of more than \$5,000 BMO prior years?	Check if Amendment Amendment Amendment Amendment Amendment Amendment Amendment Amendment Aga reportable positions on or before the calendar year or in the prior two years attach Schedule V. Sompensation of more than \$5,000 BMO prior years?	FORM B For use by candidates and new employees Date of FRIMARY RElection: MARY RELECTIONS PER EACH OF THESE QUESTIONS Ves No No V. Did you hold any reportable positions on or before the first of filling in the current calendar year or in the prior May with an outside entity? Yes No No V. Did you have any reportable agreement or arrangem with an outside entity? Yes, complete and attach Schedule V. VI. Did you receive compensation of more than \$5,000 a single source in the May plot years.

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name ロアイラ ROUZER

Page 2

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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.

Exclude: Military bay (such as inational Suario of Deserve bay), lederal remember broglams, and		Amount	unt
Course (include date of leceipt of Horizontal)	1 y p c	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
!	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
THE ROUZER COMPANY	GROSS REVENUE	5,900	27,150
Ø	GROSS SALES	2,546型	ナッナ
NC GENERAL ASSEMBLY	EARNINGS	357 24	27,140 기
			9
		3	
	9 9 9 9 9 9		5 5 5 5 1 1

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

8 ş For an ownership interest in a privately-field business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic please refer to the instruction booklet in the optional column on the far left dent child (DC) or is jointly held with your spouse (JT) If you so choose, you may indicate that an asset or the Thrift Savings Plan. ing \$5,000 or less in personal checking or savings For a detailed discussion of Schedule II requirements income source is that of your spouse (SP) or dependerived from, a federal retirement program, including provide a complete address or a description, For rental or other real property held for investment, the end of the reporting period, and (b) any other accounts; and any financial interest in, or income income during the reporting period); any deposits totalhomes and vacation homes (unless there was rental Exclude: Your personal residence, including second location in Block A. For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the (do not use ticker symbols). Provide complete names of stocks and mutual funds more than \$200 in "unearned" income during the year. reportable asset or sources of income which generated of income with a fair market value exceeding \$1,000 at identify (a) each asset held for investment or production "rental property," and the city and state account that exceeds the reporting thresholds. Examples. Asset and/or Income Source なえにな. GROWTH CAT アイド FUNDA MENTAL INVESTORS AMER.)がへ. FUNDS Simon & Schuster Mega Corp. Stock 1st Bank of Paducah, KY accounts BLOCK A GROWTH & MUTUAL TYY 21978 アスマン ADX None ➣ by your spouse or dependent child. be "None." it generated income, the value should If an asset was sold during the reportmethod other than fair market value, please specify the method used. "This column is for assets solely held ing year and is included only because reporting year. If you use a valuation Indicate value of asset at close of \$1 - \$1,000 w \$1,001 - \$15,000 റ Indefinite イ メ X \$15,001 - \$50,000 O Value of Asset メ m \$50,001 - \$100,000 **BLOCK B** ī × \$100,001 - \$250,000 G \$250,001 - \$500,000 # \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 ے ᆽ \$25,000,001 -- \$50,000,000 r Over \$50,000,000 Z Spouse/DC Asset over \$1,000,000* NONE during the reporting period if the asset generated no income closed as income. Check "None" if reinvested, must be disinterest, and capital gains, even allow you to choose specific Check all columns that apply For Tax-Deferred column. Dividends plans or IRAs), you may check the deferred income (such as 401(k) investments or that generate taxretirement accounts that do not **DIVIDENDS** Type of Income RENT INTEREST BLOCK C **CAPITAL GAINS EXCEPTED/BLIND TRUST** メ 人 TAX-DEFERRED メ メ Other Type of Income (Specify: e.g., Partnership Income or Farm Income) ブ × メ メ > None * This column is for income derived from assets solely held by your spouse or dependent child income. Check "None" if no income was earned or generated and capital gains, even if reinvested, must be disclosed income by checking the appropriate box below. Dividends, interest check the "None" column. For all other assets, indicate the category of For assets for which you checked "Tax-Deferred" in Block C, you may \$1 - \$200 = \$201 - \$1,000 # ₹ \$1,001 - \$2,500 Current Year A \$2,501 - \$5,000 S \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 × \$100,001 - \$1,000,000 Amount of Income × \$1,000,001 - \$5,000,000 × Over \$5,000,000 BLOCK D × Spouse/DC Income over \$1,000,000 メ メ メ メ × None \$1 - \$200 = \$201 - \$1,000 ≡ Preceding Year \$1,001 - \$2,500 7 ×× \$2,501 - \$5,000 < \$5,001 - \$15,000 ¥ \$15,001 - \$50,000 \$50,001 - \$100,000 × \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 × Over \$5,000,000 × Spouse/DC Income over \$1,000,000

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Name DAYID ROUZER

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ND "UNEARNED" INCOM
D" INCC

Contir	Continuation Sheet (if needed)			Name DAVID ROUZETS	Page 4 of 4
	BLOCK A	вгоск в	вгоск с	вгос	BLOCK D
· · · · ·	Asset and/or Income Source	Value of Asset	Type of Income	Amount o	Amount of Income
SP,		A B C D E F G H 1 J K L M	fy: e.g.,	Current Year	Preceding Year
<u>;</u>		000	ST -(Specif		
D _C		\$15,000 - \$50,000 - \$100,000 - \$250,000 - \$500,000 - \$1,000,000 01 - \$5,000,000 01 - \$25,000,000 001 - \$50,000,000	DS GAINS ED/BLIND TRUS	\$2,500 \$2,500 \$5,000 \$15,000 \$50,000 \$100,000 -\$1,000,000 1 - \$5,000,000	,000 12,500 15,000 15,000 \$50,000 \$100,000 -\$1,000,000
		\$100,001 - \$250,001 - \$500,001 - \$1,000,001 \$5,000,001 \$25,000,001 \$25,000,001 \$25,000,001 \$25,000,001	NONE DIVIDEND RENT INTEREST CAPITAL C EXCEPTE TAX-DEFE Other Typ	None \$1 - \$200 \$201 - \$1,0 \$1,001 - \$2 \$2,501 - \$5 \$5,001 - \$1 \$15,001 - \$ \$100,001 - \$1,000,001 Over \$5,000	None \$1 - \$200 \$201 - \$1,0 \$1,001 - \$2 \$2,501 - \$5 \$5,001 - \$1 \$15,001 - \$ \$50,001 - \$
	AMER. HIGH INCOME	*	*	*	*
	. BOND FUND of AMER	*	***		*
	TO AMERITRADE (1724)				
	CASH + CASH ALTER-	*			X
	INDEX STOCK-PER	*	*		y
	MONT, INC - (NEY)	×			*
	ATAT INC (STOCK)	*	*	*	*
	ONCOTHYREDN INC	*	*	*	*
	15T6LOBAL (ROTH)				
	PRIME FUND CAP	X	*	*	*
	DIVER FY CLAS	×	*	*	X
	TROWE PRICE CAP APPRECIATION	×	×		*
	CAP STOCK IND	*	*	*	*
	PIMCO HIGH YIELD	X	J	*	X

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name DAVID ROUZER

Continuation Sheet (if needed)

Asset and/or income Source					р т sp	
Type of income Fam Income		BENSON, NC Cuhalisal	THE ROUZER COMPANY RALEIGH, NC (CONSUUTING)	RENTA RESTVIEW		BLOCK A Asset and/or Income Source
Septiment Sept		*	12	*	\$1 - \$1,000 © \$1,001 - \$15,000 © \$15,001 - \$50,000 © \$50,001 - \$100,000 m \$100,001 - \$250,000 © \$250,001 - \$500,000 © \$500,001 - \$1,000,000 © \$1,000,001 - \$5,000,000 ©	BLOCK B Value of Asse
Partnership Income or Farm Income) Partnership Income or Farm Income)				*	\$25,000,001 – \$50,000,000 × Over \$50,000,000	
\$201 + \$1,000		***	3 8 4		EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income(Specify: e.g., Partnership Income or Farm Income)	OCK C
\$2,501 - \$5,000 < CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC			X	*	\$201 - \$1,000 \(\) \(\	Amo
\$15,001 - \$50,000 ≦ ₹ \$50,001 - \$1,000,000 ₹ ₹ \$100,001 - \$1,000,000 ₹				*	Spouse/DC Income over \$1,000,000° ≦ None - \$1 - \$200 = \$201 - \$1,000	BLOCK D

SCHEDULE III — LIABILITIES

Name DAYID ROUZER

Page _6 of *

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. ture, 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 sibowed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-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

	,		SP, DC, JT	
FIRST CITIZENS BANK	PNC mortgage	Example: First Bank of Wilmington, DE	Creditor	
2008	2001 2001	May 1998	Date Liability Incurred mo/year	
Westwieur dry. , RAC, NC	AN, RALEIGH, NC	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
			\$10,001— \$15,000 >	
*			\$15,001— \$50,000 CD	
			\$50,001— \$100,000	
	*	×	\$100,001— \$250,000	
			\$250,001— \$500,000 m	Amor
			\$500,001— \$1,000,000 T	Amount of
			\$1,000,001— \$5,000,000 ຄ \$5,000,001—	Liabil
			\$25,000,000 ± \$25,000,001—	₹
		L	\$50,000,000	
			\$50,000,000 Spouse/DC	
			Liability over ス \$1,000,000	

SCHEDULE IV — POSITIONS

cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, 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 offi-

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

and positions solely of all horiotally hattire.	EXCHANGE:
Position	Name of Organization
computeut	Janhing Hill Consultar's, xxc
consultant	Greenteck Solutions Group, FTC
Consultant	Compass NC
contract grower	Philip Morris International
O	

SCHEDULE V — AGREEMENTS

Name DAVID ROUZER 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
JAN 1, 2013	MYSELF & State of N,C.	RETIRED & FORMER STATE LEGISLATORS HEALTH PLAN
JAN 1, 2013	MYSELF & State of N.C.	TEACHERS & STATE EMPLOYEES PETIREMENT SYSTEM BENEFITS
		AT AGE 60.

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

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. 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

	Source (Name and Address)	Brief Description of Duties
Example:	le: Doe Jones & Smith, Hometown, Homestate	Accounting services
JENT	JENKINS HILL CONSULTING, FFC-WASH, D.C.	Consulting services for Shumon's 1400
		Boodway, 870., Japan USA + ting mahu
		24.