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UNITED STATES HOUSE OF REPRESENTATIVES

CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT For use by Members, officers, and employees	yees JUN 1 0 2015	र १ - - -
	2013 JULI 14 PH 12: 07	07
Name: Marshall C. Sanford Daytime Telephone.	(Office Use Only)	
Filer Member of the U.S. State: C Officer or Employing Office: Status House of Representatives District: Employee	A \$200 penalty shall be	assessed
Annual (May 15, 2013) Amendment	against anyone who files more than 30 days late.	more than
PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS		
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? Yes No VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	e, aggregating more Yes	<u>₹</u>
	ent child receive any travel in the reporting Yes source)?	N ₀
	reportable positions on or before the date calendar year? attach Schedule VIII.	No No
child purchase, sell, reaction exceeding Yes No No IX. Did you have any an outside entity? If yes, complete and	reportable agreement or arrangement with Yes attach Schedule IX.	8
Id have any reportable Yes No Mappropriate Rach ques appropriate	tion in this part must be answered and the schedule attached for each "Yes" response.	d the ponse.
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER E	EACH OF THESE QUESTIONS	NS
IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?	Yes	No No
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 dependent child?	t be disclosed. Have you Yes	<u>₹</u>
EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or defined they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	f a spouse or dependent child because Yes	No No

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SCHEDULE I—EARNED INCOME

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.

Source	Туре	Amount
A company of the control of the cont	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
	salaru	130,000.
Coastal Forest Resources	Director's Fee	38, H.S.
	T)	22.639
		•

Sc. Deforred Comp.	Scott Trade	WBS .	Merall Lynch	Bank of America	JT 1st Bank of Paducah, KY Accounts	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 a personal checking or saving accounts; and any financial interest in, or income derived from, a lederal 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 location in Block A.	For rental or other real properly held for investment, provide a complete address or a description, e.g., rental properly, and a city and state.	For all IRAs and other reurement 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 licker 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
X	*	X	><	X	X	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 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000	D D D D D D D D D D D D D D D D D D D		 This column is for assets held solely by your spouse or dependent child. 	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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.	Value of Asset	вгоск в
×	*	X	X	*	×		×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	опе)	reporting period:	vested, must be disclosed as income. Check "None" if the asset generated no income during the	⊕ ≍ →	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	Type of Income	вгоск с
*	1	2	X	X	×		×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$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		dependent child.	This column is for income generated by assets held solely by your spouse or			Amount of Income	BLOCK D
2/#	2/#	1/4	Al /A	7. F		((Par. 1121)	S (partial)	follows: (S) (partial) See below for example. P. S.	portion of an asset is sold, please indicate as	If only a	уват.	(E) exceeding \$1,000 in reporting	asset had purchases (P), sales (S), or exchanges	Transaction	BLOCK E

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

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Continuation Sheet (if needed)

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														Biother Rd. 120	Kims Plaza, LLC	Blind John, U.C.	Smith Tract LLC	Santon Land Co.	Cotton Hope, LIC	Blue Creek (Dipital	Brick 21, LLC		Asset and/or income source	BLOCK A
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SCHEDULE V— LIABILITIES

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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 owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal close of the preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child. are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you

		SP, DC, JT	
None	Example: First Bank of Wilmington, DE	Creditor	nn on
	May 1998	Date Liability Incurred Mo/Year	
	Mortgage on 123 Main St., Dover, DE	Type of Liability	
		\$10,001- \$15,000	
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		\$25,000,001- \$50,000,000	
	igg	Over \$50,000,000 — Spouse/DC Liability	
		Over \$1,000,000*	

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
None		

SCHEDULE VIII—POSITIONS

Name Marshall C. Sanford Pagell or Il

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

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organiza-

tions); and positions solely of an honorary nature.	orary nature.
Position	Name of Organization
Contributor	Fox News
Bould Member/Director Lending Tree	Lending Tree
Board Member/Director	Board Nember/Drieta Coastal Forest Resources
Member	Warious form/real estate partnerships (Brick 21, LLC: Blue Creek Capital)
	Botton those, LC: Surphy Land Co: Smith Tract-UC; Blind John LC;
	Kinds Plaza LLC Bia Tree Pd. LLC)

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

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	Date	Parties To
		None