		MAY -2 2014	2016	
UNITED STATES HOUSE OF REPRESENTATIVES FORM FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - 2 M 2014 For use by candidates a	FORM B dates and new employees	CECHSLATIVE RESOURCE CERTER 3	SOURCE CEP PH 1: 2	
		OFFICE OF REPRESENTATIVES	THE CLERK EPRESENTA	TIVES
Name: Jeffran Carron Daytime Telephone:	 -			
		(Office L	(Office Use Only)	
Filer Candidate for the State: VR Date of 4 Nov 2014 House of Representatives District: Election: 4 Nov 2014	Check if Amendment	A \$200 penalty shall be assessed		assessed
Status New officer or Employing Office:		more than 30 days late		
In all sections, please type or print clearly in blue or black ink.				
PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	SNC			
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 Wo Wo If yes, complete and attach Schedule I.	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.	efore the date or two years? Yes	Š	₹
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? Yes Wo With an outside en if yes, complete and attach Schedule II.	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	angement Yes		No K
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes Mo Yi. Did you receive or a single source in the If yes, complete and attach Schedule III.	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.	\$5,000 from Yes		<u>×</u>
Each question in this part must be answered and the appropriate sched	hedule attached for	ule attached for each "Yes" response.)nse.	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION —	ANSWER EACH OF THESE QUESTIONS	OF THESE QUE	STIONS	
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?	er "excepted trusts" need no endent child?	ot be Yes		No.
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.	r liabilities of a spouse or de the Committee on Ethics.	pendent child Yes	w	No. Ç

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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Jeff run
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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.

Amount	effett programs, and belieffe it	Amount Amount	unt
Cource (include date of receipt for nonorana)	Type	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
Mashuille, TN	Sodary	28,000	81443
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whole life Innuance	Amesicum General	Cachs Wideap value	Asu ver 4016 (a) de mar	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, Mega Corp. Stock	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 II requirements, please refer to the instruction booklet.	Exclude: Your personal residence, including second	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	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	For all IRAs and other retirement 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 ticker 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
~~		*		×	Indefinite	X	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 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000		B C D E F G H - C X F M	*This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report- ing year and is included only because	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	BLOCKB
8		8		×	Royaties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inco	me)		during the reporting period.	interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column. Dividends ,	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate taxing efferred income (such as 401(k)).	Type of Income	BLOCK C
		0			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* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$15,001 - \$50,000 \$15,001 - \$50,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000		Current Year Preceding Year		* This column is for income derived from assets solely held by your spouse or dependent child.	_	For assets for which you checked "Tax-Deferred" in Block C, 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 rejivested must be disclosed as	Amount of Income	BLOCK D