\ <u>\$</u>	V <sub>es</sub> □	≱pendent child	ities of a spouse or dependent child Committee on Ethics.	"unearned" income, transactions, or liabilitudes you have first consulted with the C	arned" income, s you have fire	ny other assets, "une ot answer "yes" unles	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilit because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the C	EXEMPTION because the
No.	Yes 🔲	ot be	ccepted trusts" need no	s and certain other "ex spouse, or a depender	ittee on Ethics	pproved by the Commot such a trust benefit	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-I
S	NOITSAUE	)F THESE (	- ANSWER EACH OF THESE QUESTIONS	MATION — ANS	TINFORM	ENT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUS
	esponse.	each "Yes" re	lule attached for each "Yes" response.	ppropriate sched	and the a	ust be answered	Each question in this part must be answered and the appropriate schedu	
<u>\$</u>	Š S	\$5,000 from	npensation of more than \$5,000 from to prior years? ttach Schedule VI.	VI. Did you receive compensation of more a single source in the two prior years? If yes, complete and attach Schedule VI	Š	ort-	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, able liability ( If yes, comp
П	eg D	rangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any reportable agreemen with an outside entity? If yes, complete and attach Schedule V.	S S	eriod? Yes	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, y income of mo reportable as If yes, comp
<u>R</u>	Yes 🔲	pefore the date or <u>two</u> years?	portable positions on or before the date slendar year or in the prior two years? ttach Schedule IV.	IV. Did you hold any reportable positions o of filing in the current calendar year or in the lif yes, complete and attach Schedule IV.	S D	es or Yes	<ol> <li>Did you or your spouse have "earned" income (e.g., salaries fees) of \$200 or more from any source in the reporting period?</li> <li>If yes, complete and attach Schedule I.</li> </ol>	I. Did you or fees) of \$200 <b>If yes, comp</b>
				ANSWER EACH OF THESE QUESTIONS	OF THESI	ISWER EACH	PRELIMINARY INFORMATION — AN	PRELIMI
						k ink	in all sections, please type or print clearly in blue or black ink	in all section
who files		A \$200 penalty shall be against any individual more than 30 days late.	Amendment	-4/21	Election:	District:	House of Representatives District:  New officer or Employee	Filer Status
; ·	(Office Use Only)	(c)	2					
23 &	2012 <b>6</b> 07 12 <b>6</b> 7 1:23	2012 007 1		Daytime Telephone:	Daytime	Field II	HOLLAND L REDFIELD I	Name:
Page 1 of	4 2012	OCT 0	<b>≜ B</b> and new employees	<b>FORM B</b> For use by candidates and new employees	<i>2011</i> F		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2011 - December 2	UNITED FINANC Period co

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Hullond L. Redfich I Page Lot L

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.

<b>Exclude:</b> Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	ement programs, and benefits re	ceived under the Social S	Security Act.
COLUMN (include date of receipt for honomaria)		10.1.12. Amount	unt
Cource (include date of receipt for nonorana)	lype	丑	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
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
JH Communications Strain VI	Contract Re distance	7:200-	15.600
Along Inc. St. Crix VI	Consulting Fees	1	12364
GERS ICC. Shorix 1/2	Retirement.	36 600°	47.500°
Trinity Services OldsmorFl	Dividens.	27,060	36/1005
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	Trail, Buone N.	7A (	co.	1Bc		DC, Examples:		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 (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.	For rental or other real property held for investment provide a complete address.	crinc investments), provide the value for each asset treix in the account that exceeds the reporting thresholds. For refirement 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.	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 it not exercised to select the spenare	Provide complete names of stocks and mutual funds (do not use ticker symbols).	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.	identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at	Asset and/or Income Source	
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						Joys		Other Type of Income	•	ne	ins,	<b>돌</b> 윤.		÷ ap p	9	
						Royalties		(Specify: e.g., Partnership Income or Farm Incom	9)	asset generated no income during the reporting period.	interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the	plans or IRAs), you may check the "Tax-Deferred" column. <b>Dividends</b> ,	allow you to choose specific investments or that generate tax-	Check all columns that apply. For		
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#### SCHEDULE III — LIABILITIES

Name It I and I Rollfish I Page 1 of 1

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

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SO ' '	Citimortage Soux Fells 1/2002	First Bonh PR, PR.	Example: First Bank of Wilmington, DE	Creditor
	i/soux	dreilh	May 1998	Date Liability Incurred mo/year
	Martag qu	Mortgage	Mortgage on 123 Main Street, Dover, DE	Type of Liability
				\$10,001— \$15,000
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#### **SCHEDULE IV — POSITIONS**

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 officer, 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.

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 solely of an honorary nature

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	Position	Name of Organization
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### SCHEDULE V — AGREEMENTS

Name Hillord L. Restiela

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
	スタ	

# 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.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
Sec I	