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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	POSTRIARY ILLEGIST.
Name: STEVEN B. LARCHUIL	Daytime Telephone	2015 MAY -4 PM 12: 26
New Member of or Candidate for State: U.S. House of Representatives District: Candidates – Date of Election:	Check if Amendment	U.S. HOUSE OF THE CLERK OF THE CLERK OF RECEEDING TIVES
New Officer or Employee Employing Office:	Period Covered: January 1,to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS	F THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting period Yes No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	No F. Do you have any reportable agreements or arrangements with an outside entity?	arrangements with Yes Mo
D. Did you, your spouse, or your dependent child have any reportable γes liability (more than \$10,000) at any point during the reporting period?	No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	\$5,000 from a single Yes No No
ATTACH THE COR	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B	T INFORMATION - ANSWER <u>BOTH</u> OF THESE QUESTIONS	QUESTIONS
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 that benefits you, your spouse, or dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. Ha	ve you excluded from 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.	income, transactions, or liabilities of a spouse or dependent child because Committee on Ethics.	se they meet all three Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Steven LAREHUIC

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An how you sistems	acillogand Educay Operhail	E,	British & Ties	PALOWHAP .	ABC Hedge Fund	oles: Simon & Schuster	Mega Corp Stock	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state. 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); and any financial income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you have a privately-traded fund that is an Excepted threatment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or former source is that of your spouse (SP) in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	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 only ticker symbols).	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year.	Assets and/or Income Sources	BLOCK A
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Use additional sheets if more space is required.

Name: Stevend Lanchure

SCHEDULE C -- EARNED INCOME

n the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer nurce for other spouse earned income exceeding \$1,000. See examples below.

List the source, type, and amount of earned income from any source (other than and filer's spouse, list the source and amount of any honoraria. List only the source **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)	1		
Course (Illorade date di Locolption Indicatio)	Type	Current Year to Filing	Preceding Year
	Honorarium	\$0 \$0	\$500
Examples: Civil War Roundtable, Richmond, VA (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 \$0 N/A	\$1,000 N/A
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SCHEDULE D - LIABILITIES

Name: Sieval LAncture Page 5 of_

period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence exceeded \$10,000. liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting *Column K is for liabilities held solely by your spouse or dependent child.

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can wand	credition 95	contain ands	and tangs	moni cabe	Mortgage on Rental Property, Dover, DE	Type of Liability						
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						Over \$1,000,000* (Spouse/DC Liability)	*					

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

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SCHEDULE F - AGREEMENTS

	Name: STOVEN LARCHUIC
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Identify the date, parties to, and general terms of any agreement or arrangement that you have 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
		NONE	Parties to Agreement
			Terms of Agreement

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

government and any information considered commential as a result of a priving	government and any information considered confidential as a result of a privileged relationship recignized by law. To not repeat information listed on Schedule C.
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
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Name: STEWEN LANCHUIL Page 7

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