	Yes No V	ία.	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.	sets, "unearned" i ? Do not answer ";		Exemptions-	
	Yes No 🗸	Ð	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?	ved by the Commit details of such a tri	Details regarding "Qualified Blind Trusts" approdisclosed. Have you excluded from this report	Trusts-	
	Yes 🗌 No 🐼		itial Public Offering?	das a part of an Ini	Did you purchase any shares that were allocated as a part of an initial Public Offering?	IPO	
	NUESTIONS	SE QI	INFORMATION ANSWER EACH OF THESE QUESTIONS	OR TRUST	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	and	찡
					If yes, complete and attach Schedule V.	If yes, complete	
	the appropriate	d and th	Each question in this part must be answered and the appropriate	Yes No	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Did you, your spour (more than \$10,000	.<
			If yes, complete and attach Schedule IX.		if yes, complete and attach Schedule IV.	If yes, complete	
	Yes No	outside	Use you have any reportable agreement or arrangement with an outside IX. emity?	Yes No	ure your spouse, or dependent chird purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	reportable asset in	₹
		•	If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	If yes, complete	
	Yes No 🗸	iling in the	Uid you note any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes 🕢 No 🗌	und you, your spouse, or a dependent child receive "unearned" income or more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?	more than \$200 in t	Ē
			If yes, complete and attach Schedule VII.		if yes, complete and attach Schedule II.	If yes, complete	
	Yes V No	ble travel (han \$350	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$350 from one source)?	Yes No	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	Did any individual o	=
			If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	If yes, complete	
	Yes 🗌 No 🗸	ble gift in therwise	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise examply)	Yes 🗌 No 🗸	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Did you or your spoor more from any s	-
			QUESTIONS	OF THESE G	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	ELIMINARY	PR
	more than 30 days late.	more late.	Termination Date:	☐ Termination	nnual (May 15)	Report Type	
	be assessed against anvone who files	be as	Employee	-	nouse of Representatives District: Two	Status	
	A \$200 penalty shall	A \$20	Officer Or Employing Office:			Filer	
	(Office Use Only)	(ô	(Daytime Telephone)		(Full Name)		
5 PH 12: 55	2013 MAY 15 PH 12: 55				William Steve Southerland, II		
	טרנייתת		For use by Members, officers, and employees	MENT	CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	ALENDAR YEA	2
j Mo	TAND M		FORM A Page 1 of 4	TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	NITED ST	
	-	•					Ì

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

פעחבטטרי	SCHEDOLE III - ASSETS AND ONEARNED INCOME		Name William Steve Southerland, II		Page 2 of 4
ļ	BLOCK A	вгоск в	вгоск с	BLOCK D	BLOCK E
ASSeidentify (a) each a value exceeding reportable asset "unearned" inco	Asset and/or income Source 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.	Year-End Value of Asset Indicate value of asset at close of reporting year. If	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that	Amount of income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E)
Provide complete For all IRAs and a each asset held i For rental or othe	Provide complete names of stocks and mutual funds (do not use ticker symbols.) 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. For rental or other real property held for investment, provide a complete address or	method other than fair market value, please specify the method used. If an asset was sold during the reporting year and is	(such as 40 (lk) plans or iRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if	the appropriate box below. Dividends, interest, and capital gains, even if relinvested, must be disclosed as income. Check "None" if no income was earned or generated.	reporting year.
For an ownership in state the name of the location in Block A.	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.	generated income, the value should be "None." This column is for assets	during the reporting period.	* This column is for income generated by assets held solely by your spouse or dependent child.	
Exclude: Your pe (unless there was \$5,000 or less in a in, or income der Savings Plan.	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 federal retirement program, including the Thrift Savings Plan.	or dependent child.		,	
If you so choose, you may indice spouse (SP) or dependent child optional column on the far left.	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 discuinstruction booklet.	For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.				
JT	528 West Baldwin Road Panama City, FL 32405	\$500,001 - \$1,000,000	None	NONE	
	Funeral Service Inc. Stock	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	MaChriste Inc. Stock Funeral Service Business Panama City, Florida	\$250,001 - \$500,000	None	NONE	
JT	Merrill Lynch Cash Account	\$1 - \$1,000	INTEREST	\$1 - \$200	
JT	Trustmark Savings Account Lynn Haven, FL	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE V - LIABILITIES

Name William Steve Southerland, II

Page 3 of 4

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: for liabilities held solely by your spouse or dependent child. Any mortgage on your personal 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 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 close of the preceding calendar year exceeded \$10,000. *This column is

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	Bank of America	August 2007	Mortgage on 528 W. Baldwin Road Panama City, FL 32405	\$250,001 - \$500,000
JT	Santander	June 2006	Boat	\$100,001 - \$250,000
J	Bank of America	October 2005	Mortgage on 900 Kristanna Drive Panama City, FL 32405	\$100,001 - \$250,000
J.T	Trustmark	December 2010	Home Equity	\$10,001 - \$15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name William Steve Southerland, II Page 4 of 4

spouse or dependent child that is totally independent of his or her relationship to you. the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
The Heritage Foundation	Jan. 25-27	Washington DC-Philadelphia, PA-Panama City, FL	A	Υ	Z	None
Center for the Constitution at James Madison's Montpelier	July 26-27	Washington DC-Orange, VA- Washington DC	Y	Y	Υ	None
Council for National Policy	Aug. 22-23	Council for National Policy Aug. 22-23 Panama City, FL-Tampa, FL-Panama City, FL	~	~	Z	None