No R	Yes	pendent child	ities of a spouse or dependent child committee on Ethics.	"unearned" income, transactions, or liabilities of a spouse or unless you have first consulted with the Committee on Ethics	arned" income ss you have fi	her assets, "une nswer "yes" unle	nis report any ot ption? Do not ar	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabili because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the C	TION — Ha they meet	EXEMP.
N ₀	Yes 🔲	ot be	cepted trusts" need no	s and certain other "ex spouse, or a depender	nittee on Ethic ting you, your	ed by the Comn	d Trusts" approvort details of sur	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?	Details r	TRUSTS disclosed
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	esponse.	each "Yes" r	ule attached for	appropriate sched	and the a	oe answered	s part must l	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	Ea	
No No	Yes 🔲	\$5,000 from	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.	VI. Did you receive compensation of a single source in the two prior years? If yes, complete and attach Schedu	No 🔲	Yes 🔀	ave any report- orting period?	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.	u, your spou by (more than mplete and	III. Did yo able liabili If yes, co l
No X	Yes 🔲	rangement	Did you have any reportable agreement or arrangement th an outside entity? yes, complete and attach Schedule V.	V. Did you have any rep with an outside entity? If yes, complete and at	No.	Yes X	sceive "unearned" d or hold any end of the period?	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.	more than asset worth	II. Did you income of reportable If yes, co
N _O	Yes 🗶	реfore the date от <u>two</u> years?	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.	IV. Did you hold any rep of filing in the current ca If yes, complete and at	N _O	Yes X	(e.g., salaries or orting period?	 Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. 	or your spo 200 or more mplete and	fees) of \$2
í				ANSWER EACH OF THESE QUESTIONS	OF THES	/ER EACH	E	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSW	MINAR	In all sect
:	more than 30 days late.	more than :				g Office:	Employing Office:	employee		
assessed who files	A <i>\$200 penalty</i> shall be assessed against any individual who files	A \$200 pen against any	Check if Amendment	n: 3 - 19 - 19	Date of Election:	Sc	State: es District: _	Candidate for the House of Representatives	"]	Filer Status
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Page 1 of 7	FEB 1 5 2013.	FEB	⋀ B and new employees	FORN For use by candidates a		TATIVES	REPRESENT	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2012 - フェー・フィートラー・フィート	D STAT	FINAN Period
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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Josethan Hoffman

Page Z of 7

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.

						Charleston School of Law Charliston SC	everly MA	The Citadel, Charleston, SC	The Chertoff Group, Wishington DC	Harris County, Texas Public Schools	XYZ Trade Association, Chicago, IL (Rec'd December 2)		XYZ Corporation, Houston, TX	Course (include date of receipt for nonoralia)	Source (include date of receipt for honoraria)	3 F - 3 (
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						Ф	Φ	ф	Ф	NA	0	\$400	\$6,300	Current Year to Filing	Amount	
					-	1500	7817	5,000	103,600	NA_	\$1,000	\$3,200	\$28,450	Preceding Year	unt	

3 2	اگر §	Keely small it it cop.	TETE Crown DODS Find	Harris Oakmerk, Murray	IN ILM (K) DEP		Examples:	SP. SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> 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 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.	account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address.	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. 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) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the
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*	R R	R	*	አ		×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Fi	Farm Income	3)	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
*	*	×	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 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$5,000 \$201 - \$1,000 \$1,001 - \$5,000 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Current Year Preceding Year	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 category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

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Page 5 of 2

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SCHEDULE III — LIABILITIES

Name Jonethan Hoffman

Page 6 of 1

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

				SP, DC, JT
		ACS Education Services	Example: First Bank of Wilmington, DE	Creditor
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		My 02 Student loan	Mortgage on 123 Main Street, Dover, DE	Type of Liability
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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.	ture.
	Position	Name of Organization
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SCHEDULE V — AGREEMENTS

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Name

Page 7 of 2

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.

SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

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. 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

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

GPO: 2012 72-584 (mac)