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UNITED STATES HOUSE OF REPRESENTATIVES FORM B FINANCIAL DISCLOSURE STATEMENT FOR New Members, Candidates, and New Employees	LEGISLATIVE REGORACE GENTER
Name: Laura B. Fjeld Daytime Telephone:_	U.S. HOUSE OF REPRESENTATIVES
New Member of or Candidate for State: NC    V	September 1, (Office Use Only)
STATUS  New Officer or Employee  Employing Office:  Period Covered: January 1, 2013  to _May 12, 2014	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF 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?      b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?      Ves X No      C. Did you hold any reportable positions during the reporting or in the current calendar year up through the date of filing?      a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period?      E. Did you hold any reportable or in the current calendar year up through the date of filing?	during the reporting period Yes X 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 Yes X No Enough Period?	rarrangements with Yes No X
D. Did you, your spouse, or your dependent child have any reportable tiability (more than \$10,000) at any point during the reporting period?  Itability (more than \$10,000) at any point during the reporting period?  J. Did you receive compensation of more than \$10,000 at any point during the reporting period?	re than \$5,000 from a single Yes No X
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THES	ESE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. He this report details of such a trust that benefits you, your spouse, or dependent child?	Have you excluded from Yes No X
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child becautests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	pecause they meet all three Yes No X

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Phodein cond	BB&T Checking 3914	BB&T Checking 2969	BB&T Checking 1084	ABC Hedge Fund	Simon & Schuster	Mega Corp Stock	For restal and other real property held for investment, provide a complete address or description, e.g., rental property,* and a city and etate.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the name of the business, the name of the business, the name of the geographic location in Block A.  Escalues: Your personal readence, including as early transfer from a fischer framess and variation homes (unless there was second retrees in or income derived from, a fischer framess in vital reporting period), and any financial retrees it no many financial retrees in a fischer british and provides and any financial retrees in including the Thirtt Swings Hain.  If you have a privately-traded fund that is an Excepter investment Fund, please check the "EIF" box.  If you achoose, you may indicate that an asset of home source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (SP) or dependent child (DC), or jointly held with anyone (SP) or dependent child (DC), or jointly held with anyone for a challed discussion of Schedule from a feetaled discussion of Schedule frequirements, please refer to the instruction bookles.	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 all IRAs and other retrainent plans (such a 401(k) plans) provide the value for each asset heid the account that exceeds the reporting thresholds.	identity (a) each asset held for investment or production of income and with a fair market value accessing 31,000 at the end of the reportable asset or source of income which generated more than \$200 in unearned income during the year.  Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Assets and/or income Sources	BLOCK A	
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Name: Laura B. Fjeld

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Name: Laura B. Fjeld

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Name: Laura B. Fjeld

Page 5

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Name: Laura B. Fjeld

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Name: Laura B. Fjeld

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Name: Laura B. Fjeld

Page 8 of 11

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																		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		
	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×		None —		
						L												\$1-\$200 =		
Current Year   St.001-455,000   C   St.001-455,000   C   St.001-455,000   C   St.001-455,000   C   St.001-455,000   C   St.000.001   St.000.000   C   St.000.001   St.000.000   C   St.000.001   St.000.000   C   St.000.001   St.000.000   C   St.000.000   C   St.000.000   C   St.000.000   C   St.000.000   C   St.000.000   C   St.000.000   C   St.000.000   C   St.000.455,000   C   St.000.455,000   C   St.001-455,000   C   St.000.000   C   St.000				L	<u></u> .													\$201-\$1,000 ±		
SSD,001-\$1,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000						<u> </u>														
SS0,001-\$1,000,000   E   S10,001-\$1,000,000   F   S10,0001-\$1,000,000   F   S10,0001-\$1,000,000   F   S10,000,000   F   S100,001-\$1,000,000   F   S100,001-\$1,000,000   F   S100,001-\$1,000,000   F   S100,001-\$1,000,000   F   S100,001-\$1,000,000   F   S100,001-\$1,000,000   F   S10,000,000   F   S100,001-\$1,000,000   F   S100,0000   F   S100,001-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000   F   S100,000-\$1,000,000   F   S100,000-\$1,000,000   F   S10						L_								<u> </u>	<u> </u>			\$2,501-\$5,000 <	<b>?</b>	
SSD,001-\$1,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000						L												\$5,001-\$15,000 ≤ <b>3</b>		
SSD,001-\$1,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000,000   SSD,000-\$1,000,000   SSD,000-\$1,000						<u> </u>												\$15,001-850,000 ≦		
Si,000,001-45,000,000   X			<u> </u>	ļ		L_												\$50,001-\$100,000		
X     X     X     \$1,001-\$2,500     ₹       X     X     \$2,501-\$5,000     ₹       \$5,001-\$15,000     ₹     ₹       \$15,001-\$60,000     ₹     ₹       \$50,001-\$1,000,000     ₹     ₹       \$100,001-\$5,000,000     ₹       \$1,000,001-\$5,000,000     ₹       \$2,001-\$1,000,000     ₹       \$2,001-\$2,000,000     ₹       \$2,001-\$3,000,000     ₹       \$2,001-\$3,000,000     ₹       \$3,000,001-\$5,000,000     ₹			<u> </u>			L_												\$100,001-\$1,000,000 R	1	
X     X     X     \$1,001-\$2,500     ₹       X     X     \$2,501-\$5,000     ₹       \$5,001-\$15,000     ₹     ₹       \$15,001-\$60,000     ₹     ₹       \$50,001-\$1,000,000     ₹     ₹       \$100,001-\$5,000,000     ₹       \$1,000,001-\$5,000,000     ₹       \$2,001-\$1,000,000     ₹       \$2,001-\$2,000,000     ₹       \$2,001-\$3,000,000     ₹       \$2,001-\$3,000,000     ₹       \$3,000,001-\$5,000,000     ₹						<u></u>												\$1,000,001-\$5,000,000	}	
X     X     X     \$1,001-\$2,500     ₹       X     X     \$2,501-\$5,000     ₹       \$5,001-\$15,000     ₹     ₹       \$15,001-\$60,000     ₹     ₹       \$50,001-\$1,000,000     ₹     ₹       \$100,001-\$5,000,000     ₹       \$1,000,001-\$5,000,000     ₹       \$2,001-\$1,000,000     ₹       \$2,001-\$2,000,000     ₹       \$2,001-\$3,000,000     ₹       \$2,001-\$3,000,000     ₹       \$3,000,001-\$5,000,000     ₹						L_													Ĭ	m
X     X     X     \$1,001-\$2,500     ₹       X     X     \$2,501-\$5,000     ₹       \$5,001-\$15,000     ₹     ₹       \$15,001-\$60,000     ₹     ₹       \$50,001-\$1,000,000     ₹     ₹       \$100,001-\$5,000,000     ₹       \$1,000,001-\$5,000,000     ₹       \$2,001-\$1,000,000     ₹       \$2,001-\$2,000,000     ₹       \$2,001-\$3,000,000     ₹       \$2,001-\$3,000,000     ₹       \$3,000,001-\$5,000,000     ₹																		Spouse/DC Income over \$1,000,000° ≚	] =	Š
X     X     X     \$1,001-\$2,500     ₹       X     X     \$2,501-\$5,000     ₹       \$5,001-\$15,000     ₹     ₹       \$15,001-\$60,000     ₹     ₹       \$50,001-\$1,000,000     ₹     ₹       \$100,001-\$5,000,000     ₹       \$1,000,001-\$5,000,000     ₹       \$2,001-\$1,000,000     ₹       \$2,001-\$2,000,000     ₹       \$2,001-\$3,000,000     ₹       \$2,001-\$3,000,000     ₹       \$3,000,001-\$5,000,000     ₹				×		×						×	×					None -	7 <b>-</b>	š
X     X     X     \$1,001-\$2,500     ₹       X     X     \$2,501-\$5,000     ₹       \$5,001-\$15,000     ₹     ₹       \$15,001-\$60,000     ₹     ₹       \$50,001-\$1,000,000     ₹     ₹       \$100,001-\$5,000,000     ₹       \$1,000,001-\$5,000,000     ₹       \$2,001-\$1,000,000     ₹       \$2,001-\$2,000,000     ₹       \$2,001-\$3,000,000     ₹       \$2,001-\$3,000,000     ₹       \$3,000,001-\$5,000,000     ₹				<u> </u>														\$1-\$200 =	8	
X   X   X   X   X   X   X   X   X   X			×			L_				×	×			×	×	×			1 3	
. \$1,000,001\$6,000,000 × Over\$5,000,000 ≥		×				L	×	×										\$1,001-\$2,500 <	,	
. \$1,000,001\$6,000,000 × Over\$5,000,000 ≥			<b> </b>		×	<u> </u>			×									\$2,501-\$5,000 <		
. \$1,000,001\$6,000,000 × Over\$5,000,000 ≥			<u> </u>	ļ		oxdot												\$5,001-\$15,000 ≤ <b>2</b>		
. \$1,000,001\$6,000,000 × Over\$5,000,000 ≥			<u>L</u> _	L	$ldsymbol{f eta}$	L_								ļ				\$15,001-\$50,000 ≦ Z		
. \$1,000,001\$6,000,000 × Over\$5,000,000 ≥										L								\$50,001-\$100,000 ≦		
Over \$5,000,000 ≚																		\$190,001-\$1,000,000 👨	<b>' [</b>	
																		\$1,000,001-\$5,000,000	1	
Spouse/DC Income over \$1,000,090° 🖂																		Over \$5,000,000 🔀	1	
																		Spouse/DC Income over \$1,000,090" 걸		

#### SCHEDULE C - EARNED INCOME

Name: Laura B. Fjeld	
Page 9 of	
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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) totaling \$200 or more during the reporting period. For both the filer and filer's 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.

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.

		Am	Amount
Source (include date of receipt for honoraria)	Type	Par to Eilling	ı
	· Jr ·	Correct rear to Filing	Preceding rear
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland	Selery	\$20,000	\$78,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
University of North Carolina , Chapel Hill, NC	Salary	<b>\$</b> 0	\$112,764
Duke University, Durham, NC	Spouse Salary	N/A	N/A
•			

#### SCHEDULE D - LIABILITIES

Name: Laura B. Fjeld	
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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 (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 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 exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child. 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

		ЛT		рс, <del>1</del> 1 8 <sub>6</sub>		
		Morga	Example			
		Morgan Stanley	First Bank of Wilmington, DE	Creditor		
		Sept 2011	5/96	Date Liability Incurred MO/YR		
		Express Credit Line	Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
				\$15,001- \$50,000	80	
				\$50,001- \$100,000	ი	
		×	×	\$100,001- \$250,000	0	   
				\$250,001- \$500,000	m	moun
				\$500,001- \$1,000,000	TI	t of Lia
				\$1,000,001- \$5,000,000	၈	Amount of Liability
				\$5,000,001- \$25,000,000	I	
				\$25,000,001- \$50,000,000	-	
				Over \$50,000,000	۔	
				Over \$1,000,000* (Spouse/DC Liability)	*	1

#### 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, fratemal, 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

Position	Name of Organization
Board Member	Center for International Understanding

#### **SCHEDULE F - AGREEMENTS**

Name: Laura B. Fjeld	
Page_11 of11	

Identify the da	ate, parties to, and general terms of any agreement or arrangement that you have or deferral of payments by a former or current employer other than the U.S. gove	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	Parties to Agreement	Terms of Agreement
	None	

# 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.

Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
None	
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