S S	Yes	pendent child	ies of a spouse or dependent child ommittee on Ethics.		arned" income ss you have fir	er assets, "une swer "yes" unles	EXEMPTION —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 Co	EXEMPTION because they
N ₀	Yes	ot be	cepted trusts" need no	s and certain other "exce spouse, or a dependent	nittee on Ethica	ed by the Comn h a trust benefi	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—Do
Ø	QUESTION)F THESE (ANSWER EACH OF THESE QUESTIONS	1	T INFORM	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION
	esponse.	each "Yes" r	ule attached for each "Yes" response.	ppropriate schedul	and the a	e answered	Each question in this part must be answered and the appropriate schedu	
₹	Yes	\$5,000 from	ensation of more than \$ prior years? ch Schedule VI.	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.	S D	Yes	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, yo able liability (m If yes, comple
<u>\$</u>	Yes	rangement	ortable agreement or arrangement rach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V	<u>\$</u>	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, you income of more reportable asset if yes, comple
8	Yes M	efore the date r two years?	ortable positions on or before the day endar year or in the prior two years? tach Schedule IV.	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.		Yes 🔽	 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. 	Did you or you fees) of \$200 or lif yes, comple
				EACH OF THESE QUESTIONS	OF THES	ER EACH	PRELIMINARY INFORMATION — ANSWER	PRELIMIN
							in all sections, please type or print clearly in blue or black ink.	in all sections.
who files	against any individual v more than 30 days late.	against and more than 3						Status
assessed	\$200 penalty shall be a	A \$200 pen	Check if	Date of Wille 3,2014	Date of	# 32	Candidate for the House of Representatives District:	Filer
	(Office Use Only)	(1						
ATIVES	2014 JAN ZO THE CLERK OFFICE OF REPRESENTATIVES U.S. HOUSE OF REPRESENTATIVES	2014 JA OFFI U.S. HOUSE	.	Daytime Telephon	Daytime	R	ANTONIO C. AMADOR	Name:
Page 1 of 4 ENTER	LEGISLATIVE RESOURCE CENTER	LEGISLATIVE I	B nd new employees	FORM B For use by candidates and new employees	2014		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - FEBYURRY 1,	UNITED S FINANCIA Period cov

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name ANTONIO C. AMADOR Page 2 of 4

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. 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

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Exclude: Military pay (such as National Guard or Heserve pay), tederal retirement programs, and benefits received under the Social Security Act.	ement programs, and benefits re-	ceived under the Social S	security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
Coal co (moiade date of feceipt for floridating)	1,100	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
AMADOR + ASSOCIATES REALTY	SALARY/COMMISSION		"35,575.00
CA, PUBLIC EMPLOYEES RETIREMENT SYSTEM RETIREMENT PENSION	RETIRGHENT PENSION	45,562.43 # 45,337.00	45,337.00
AMADOR + ASSOCIATES REALTY	SPOUSE SALARY	N/A	N/A
CA, PUBLIC EMPLOYEES RETIREMENT SYSTEM SPOUSE SALARY	Spouse SALARY	N/A	N/A
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	180	20	-	3		DC, Examples:	-	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.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental	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 Rinck A	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	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 ticker symbols).	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.	Š
<u> </u>	2 ocre Lat, unimproved. Promoer	REAL ESTATE COMPANY	AMADOR + ASSOCIATES ACUTE	RESIDENTIAL RENTAL		mple		durin 000 o ft Saw th Saw thiona soun thiona stalle efer i	an % of of		a o	# or o king and a second a second and a second a second and a second	com	an €	BLOCK A Asset and/or Income Source
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		-	 		┞		\vdash	None		D 00	*This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report-	Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.	
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	×	1	_	 	₩	 	×	Spouse/DC Asset over \$1,000,000* NONE		Σ	1			0 0 0	
	~		 		╀┈	-	_	DIVIDENDS			if the asset generated no income during the reporting period.	interest, and capital gains, even if reinvested, must be disclosed as income. Check "None"	plans or IRAs), you may check the "Tax-Deferred" column. Dividends ,	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k))	
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		<u> </u>			<u> </u>	8		(Specify: e.g., Partnership Income or Farm In	come)		36	<u>कुक दे</u>	₽ ₹	중목량로직	
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					Ļ		_	Spouse/DC Income over \$1,000,000*	¥		1	rive	Ď	en in et	7 0
			 -	ļ	L			None	-			 This column is for income derived from assets solely held by your spouse or dependent child. 	income. Check "None" if no income was earned or generated.	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	BLOCK D Amount of Income
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SCHEDULE III — LIABILITIES

Name ANTONIO C. AMADOR

Page H of H

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-

L			五		SP, DC, JT	
		MORTGAGE	COLDWELL BANKER	Example: First Bank of Wilmington, DE	Creditor	
			FEBZOIC	May 1998	Date Liability Incurred mo/year	
		SAMAMENTO, CA.	FEBROID MORTGAGE ON 8503 DAIMLER WO	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
					\$10,001— \$15,000	
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					Spouse/DC Liability over ス \$1,000,000	

SCHEDULE IV — POSITIONS

cer, 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. 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 offi-

and positions solely of an honorary nature 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 or an individity nature.	iduic.
Position	Name of Organization
PRESIDENT	AMADOR & ASSOCIATES REALTH