N N N	Yes 🔲	pendent child	e, transactions, or liabilities of a spouse or del	arned" incomess you have f	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.
No X	Yes 🔲	ot be	cs and certain other "excepted trusts" need no spouse, or a dependent child?	nittee on Ethi ting you, your	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?
S	QUESTION)F THESE	MATION — ANSWER EACH OF THESE QUESTIONS	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION —
	esponse.	each "Yes" r	ιppropriate schedule attached for ε	and the a	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response
№	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.	<u>№</u>	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes Yes
№	Yes	rangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	8 □	II. Did you, your spouse, or a dependent child receive "unearmed" 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.
N _S	Yes X	efore the date	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.	No U	Did you or your spouse have "samed" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes Complete and attach Schedule I.
			EACH OF THESE QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH
assessed who files	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 penalty shall be against any individua more than 30 days late	n: Nov 2012 Check if Amendment	Date of Election:	Filer Candidate for the State: NUS House of Representatives District: 15 New officer or Employing Office:
MINES	U.S. h. (Coride USE Ohry)	U.S. how			
: 21	2012 JUN 13 AM 10: 54	\		Daytime	Name: OEORGE Edward BELL Holding Daytime Telephone:
	JUN 0 8 2012	NUC	For use by candidates and new employees		Period covered: January 1, 2011 - MAY 15, 7012
Page 1 of 4			FORM B		NCIAL DISCLOSURE STATEMENT NCIAL DISCLOSURE STATEMENT

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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name (FORLE FAMILE Bell / HIDEL Page 2 of 9

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. 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

	Compared to State of the special compared to the speci		Occurry From
Source (include date of receipt for honoraria)	Tyne	Amount	ount
	٠,١٠٠	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Framples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
United States in smith of Thesici	SAL MAN	0	25.445 16
			:

CANTON CTY BOND	HAMNOWN (the Bono	NC 2	DUNTAN CHA BOND	MAMMULICTY BOND	BBUT MONMY MET FUND		DC, Examples: Simon & Schuster	SP Mega Corp. Stock	provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the natura 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); 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 III requirements, please refer to the instruction booklet.	For rental or other real property held for investment, provide a complete address.	BLOCK A 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 to 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 account and its value at the end of the reporting period.
X:	><.	*	×	×	*	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000 \$0,000 - \$50,000,000 \$0,000 - \$50,000,000 \$0,000 - \$50,000,000		BLOCK B Value of Asset rdicate value of asset at close of reporting year. If you use a aluation method other than fair narket value, please specify the nethod used. an asset was sold during the eporting year and is included only because it generated rcome, the value should be None."
X	X	×	*	×	*	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		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 "None" 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	× × ×	× ×	X	X	X		X	X	None - \$1 - \$200 = \$201 - \$1,000 = \$1,001 - \$2,500 <	Current Year Preceding Year	mount of Inco mount of Inco accounts that a cific investment ad income (such may check the assets, indicate hecking the al ends, Interest if reinvested, ncome. Check arned or genera

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name (KONKE Ensumo Bell Holding Page 4 or 7

Cont	Continuation Sheet (if needed)			100 11 10 10 10 10 10 10 10 10 10 10 10
	вцоск а	вгоск в	вгоск с	BLOCK D
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income
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j j		000 000		
8		0,000 250,000 500,000 1,000,000 \$5,000,00 \$25,000,0	NS BLIND TRI Income Partnership	0 000 000 0,000 000,000 5,000,000 00 00 00 00 00 00 000 0
		None \$1 - \$1,000 \$1,001 - \$15,0 \$15,001 - \$50 \$50,001 - \$10 \$100,001 - \$2 \$250,001 - \$1 \$1,000,001 - \$1 \$5,000,001 - \$1 \$25,000,001 - \$1 \$25,000,001 - \$1 \$25,000,001 - \$1	NONE DIVIDENDS RENT INTEREST CAPITAL GAII EXCEPTED/B Other Type of (Specify: e.g., Poor Farm Income)	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,00 \$15,001 - \$100 \$100,001 - \$1,00 \$100,001 - \$1,00 \$100,001 - \$2,500 \$2,501 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$1,000 \$100,001 - \$1,000 \$100,001 - \$1,000 \$100,001 - \$1,000 \$1,000,001 - \$1,000 \$1,000,001 - \$1,000 \$1,000,001 - \$1,000 \$1,000,001 - \$1,000
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	MELLINBON CH, BONS	X	*	X X
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ì	STPRING (AD 14K/ME BOX)	ZIMB X	*	X .
	CHEVRON STOCK	>	X	X
	LOYAL POTON SHOUL Stock	×	×	X
	SCHLUMBAGEN STOCK	X .	×	X
	Du Powi Stock	>	*	× × × × × × × × × × × × × × × × × × ×
	Wil Paren Stock	X	*	X
	CSX STOCK	×.	×.	X
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	Word How or Consimum Stock	**************************************	X	

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed) ş Ë, 8 Asset and/or Income Source **BLOCK A** None 8 \$1 - \$1,000 O \$1,001 - \$15,000 Value of Asset \$15,001 - \$50,000 O Ш \$50,001 - \$100,000 BLOCK B \$100,001 - \$250,000 Ŧ ଉ \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 ᄌ Over \$50,000,000 NONE **DIVIDENDS** RENT Type of Income INTEREST BLOCK C **CAPITAL GAINS EXCEPTED/BLIND TRUST** Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None \$1 - \$200 \$201 -- \$1,000 **Current Year** \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 Amount of Income \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 BLOCK D × Over \$5,000,000 None X XI III VI V VI VII VIII X X \$1 - \$200 \$201 - \$1,000 **Preceding Year** \$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 \$1,000,001 - \$5,000,000 Over \$5,000,000

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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Continuation Sheet (if needed) Asset and/or Income Source **BLOCK A** None 8 \$1 - \$1,000 റ \$1,001 - \$15,000 O Value of Asset \$15,001 - \$50,000 \$50,001 - \$100,000 BLOCK B \$100,001 - \$250,000 TI \$250,001 - \$500,000 Ω エ \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ے \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 ㅈ Over \$50,000,000 NONE DIVIDENDS RENT Type of Income INTEREST **CAPITAL GAINS** BLOCK C **EXCEPTED/BLIND TRUST** Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None \$1 - \$200 ≡ ⋜ \$201 - \$1,000 Current Year \$1,001 - \$2,500 X VI VII VIII IX \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 Amount of Income \$100,001 -- \$1,000,000 × \$1,000,001 - \$5,000,000 BLOCK D × Over \$5,000,000 None \$1 - \$200 X XI III VIIV VI VI VIII IX X \$201 - \$1,000 **Preceding Year** \$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 \$1,000,001 - \$5,000,000

Over \$5,000,000

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SCHEDULE II — ASSE IS AND "UNEARNED" INCOME

Name Estile Estimon Bill Italdia, Page 7 of 9

DC	SP,	Asset and		Continuation Sheet (if needed)
		Asset and/or Income Source	PLOCK A	f needed)
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\$15,001 - \$50,000	0	[≲		
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Over \$50,000,000	-	1		l
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RENT]		•
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CAPITAL GAINS			띧	
EXCEPTED/BLIND TRUST		🖺	вгоск с	
Other Type of Income (Specify: e.g., Partnership Incom or Farm Income)	ne	Type of Income	Ĉ	
None -] []
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\$50,001 - \$100,000	Year			Page of_
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SCHEDULE III — LIABILITIES

Name Longe County Bell Howall Page & of I

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 sibowed 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.

J C S						
Creditor	Example: First Bank of Wilmington, DE	NowE				
Date Liability Incurred mo/year	May 1998					
Type of Liability	Mortgage on 123 Main Street, Dover, DE					
\$10,001— \$15,000						
\$15,001— \$50,000		, ,				
\$50,001— \$100,000 O				-		
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\$25,000,000 - \$25,000,001			·····			. ,
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\$50,000,000		I	I	I	1	l

SCHEDULE IV — POSITIONS

cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, 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);

Position	Name of Organization
DAMENIAN	CADE From UP - Immely programs inship towners unvertible and exporte

SCHEDULE V — AGREEMENTS

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Name /

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.

		ļ		Date
			NoNE	, Parties To
				Terms of Agreement

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

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 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.

Source (Name and Address)	Brief Description of Dutles
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
3/4/1	