MAY Q 8 2014

ĕ <u>X</u>	Yes 🔲	ependent child	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.	arned" income ss you have fir	eport any other assets, "und n? Do not answer "yes" unle	EXEMPTION —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	EXEN
No No	Yes 🔲	ot be	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?	nittee on Ethicating you, your	rusts" approved by the Comdetails of such a trust benef	STS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted to psed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?	TRUSTS- disclosed.
เช	QUESTION	OF THESE	MATION — ANSWER EACH OF THESE QUESTIONS	T INFORM	ENDENT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCI
	esponse.	each "Yes" r	appropriate schedule attached for each "Yes" response	and the	part must be answered	Each question in this p	
N _S	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.	_S	any report- g period? 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 able lia If yes,
S S	Yes	rangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	<u>§</u>	ve "unearned" hold any of the period? 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 income reporta
No U	Yes X	before the date or two 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.	No ON	3., salaries or ng period? Yes	I. Did you or your spouse have "earned" income (e.g., salaries fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	I. Did y fees) of If yes,
			E QUESTIONS	EACH OF THESE	ÆR	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSW	PREL
	more than 30 days late.	more than			Employing Office:	employee	
assessed who files	— @	A \$200 pen against any	Nov. 4 2014 Check if Amendment	Date of Election:	State: Arkonsas District: 4	Iter Candidate for the House of Representatives New officer or	Filer Status
	(Office Use Only)	<u></u>				0	
KATIVES	U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE	Daytime Telephone	Daytime	5	ne: Patrick Henry How	Name:
Page 1 of 5 E CENTER 1:43	LEGISLATIVE RESOURCE CENTER 2014 MAY 12 PM 1: 43	LEGISLA:	FORM B For use by candidates and new employees		PRESENTATIVES EMENT April 30, 2014	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - April 30, 2014	UNIT FINA Perio

SCHEDULE I - EARNED INCOME (INCLUDING HONORARIA)

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Page 2 of 5

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.

Amount	e e e e e e e e e e e e e e e e e e e	Amount	unt
Source (include date of receipt for nonoraria)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Argenta Arts Foundation, North Little Rock, AR Salary	Salam	ф	\$29,166
	0		

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<u> </u>	-	\overline{C}	1 1	~	Ħ	<u>M</u>	-0	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 refirement 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 Block 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.	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).	Asset and/or income source identify (a) each asset held for investment or production	•	Ė
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			ļ	ļ	▙	-	<u> </u>	None		<u> </u>	*This column is for assets solely held by your spouse or dependent child.	ing year and is included only because it generated income, the value should be "None."	method other than fair market value, please specify the method used. If an asset was sold during the reporting to the reporting	Value of Asset Indicate value of asset at close of		 `
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						Royalties		(Specify: e.g., Partnership Income or Farm In	come)		interest, and capital gains, even if reinvested, must be dis- closed as Income. Check "None" if the asset generated no income	retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "fax-Deferred" column. Dividends,	. 학		l _
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SCHEDULE III — LIABILITIES

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

								Amount of Liability	nt of L	_iabili	ţ			
SP,	Creditor	Date Liability	Type of Liability	A	8	ဂ	0	. m) <u> </u>)))]	ю —		er 🔭
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	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE			Ц						Ц		
	None													
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SCHEDULE IV — POSITIONS

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 officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

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 partyre

and positions solely of an honorary nature.	ature.
Position	Name of Organization
Trustee	U.S. Conference of Mayors
Mulber of the Board	Metroplan
Consubtant	Amenta Arts Foundation
President & Chairman of the Board ICLEI	ICLEI

Use additional sheets if more space is required.

CHEDULE V -- AGREEMENTS

Name Patrick Henry Hoys

Page So of So

efit plan maintained by a former employer. 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 ben-

Date	Parties To	Terms of Agreement
lested 2007	Myself a the lity of North Little Rock	lested 2007 Myself at the lity of North Little Rock AR Statutory Pension Provision - Mayors
	0 0	with 20+ years of service.
		6

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.

			Vone		Source (Name and Address)	G
				Accounting services	Brief Description of Duties	