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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2014 _ March 24, 2014 For use by candidates and new employees	2014 APR -2 PM 1: 16	PM 1: 16
Name: Allan Levene Daytime Telephone:	U.S. HÖUSE OF REPRESENTATIVES	ESENIAHYES
	(Office Use Only)	
Filer X Candidate for the State: Georgia Date of May 20, 2014 Amendment at Status New officer or Employing Office:	A \$200 penaity shall be assessed against any individual who files more than 30 days late.	assessed who files
in all sections, please type or print clearly in blue or black ink.		
PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS		
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes X No 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.	the date Yes X	N ₀
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. V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	ment Yes	×
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes No 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 III.	0 from Yes	×
Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	h "Yes" response.	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF	EACH OF THESE QUESTIONS	S
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?	Yes	No ×
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.	dent child Yes	No ×

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

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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) 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.

Excluse: willially bay (such as inalizate Guald of Reserve bay), receign remember programs, and being	allelit programs, and benefits it	Amount Amount	ecully Act.
Source (include date of receipt for honoraria)	Type	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
Sales and web ecommerce income, Network Consultants and steam&sauna	Consulting	\$3,179	\$34,944
ING, Atlanta, GA	Spouse Salary	NA	NA
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						7		Ş.	incomes and vacation nomes (uriness were was retain (2000) and the reporting period); any deposits total-ing \$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 Thriff Savings Pflan. 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	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 RICAL A	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. 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.	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.	_	
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					 	╁			DIVIDENDS			If reinvested, must be dis- closed as income. Check "None" if the asset generated no income during the reporting period.	plans or IRAs), you may check the "Tax-Deferred" column. Dividends, interest, and control coins, even	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>		Spouse/DC Income over \$1,000,000*	¥	+	ouse 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	Amount of Income	BLOCK D
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				1	1	1			Spouse/DC Income over \$1,000,000*	×	1		i	요누라☆		
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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Continuation Sheet (if needed) Vanguard Wellington mutual fund Vanguard Prime Money Market mutual fund Vanguard Growth & Income Vanguard Prime Money Market Rental property, Kennesaw, GA rental 4 Asset and/or Income Source mutual fund Vanguard Capital Growth investment grade mutual fund Vanguard Intermediate term Credit Union of GA, Woodstock, GA BLOCK A None 8 \$1 - \$1,000 × × \$1,001 - \$15,000 O × × 0 \$15,001 - \$50,000 Value of Asset × Ш \$50,001 - \$100,000 BLOCK B 力 \$100,001 - \$250,000 × G \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 ㅈ \$25,000,001 - \$50,000,000 Over \$50,000,000 NONE × DIVIDENDS Type of Income × RENT BLOCK C INTEREST × **CAPITAL GAINS EXCEPTED/BLIND TRUST** × TAX-DEFERRED × × × × Other Type of Income--(Specify: e.g., Partnership Income or Farm Income) × × × None × × × \$1 - \$200 × \$201 -- \$1,000 \$1,001 - \$2,500 **Current Year** \$2,501 - \$5,000 × Allan Levene \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 × \$100,001 - \$1,000,000 Amount of Income \$1,000,001 - \$5,000,000 × × Over \$5,000,000 BLOCK D × Spouse/DC Income over \$1,000,000* × × None × \$1 - \$200 × MINIM IN A A WILLIAM \$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 × Spouse/DC Income over \$1,000,000*

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ING Group Company Stock	Vanguard International Growth Fund	SSA Russ Sm/Md Cap Index Fund	Winslow Russ Sm/Md Index Fund	Robeco Bos Partners LC Val E	Vanguard Total Bond Market	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, Mega Corp. Stock	homes and vacation homes (urlass 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 retitement 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.	Evelude: Vaux personal residence includios second	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	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.	Asset and/or Income Source
×	×	×	×	×	×		Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$50,000 \$50,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*		> 80 C D H H H H H K K K K K K K K K K K K K K	*This column is for assets solely held by your spouse or dependent child.		If an asset was sold during the report- ing year and is included only because	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.	BLOCK B Value of Asset
×	×	×	*	×	*	×	Royantes	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	ne)		during the reporting period.	Interest, and capital gains, even if reinvested, must be discissed as income. Check "None" if the asset generated no income	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))	BLOCK C Type of Income
×	×	×	×	*	×	×	X		None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$100,001 - \$1,000,000 \$1,000,001 - \$1,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$50,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$1,000,000		Current Year Preceding Year		* 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.	inco	BLOCK D Amount of Income

SCHEDULE III — LIABILITIES

Name Allan Levene

Page 6 of 7

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 furnitively. 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 sibling 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.

								Amou	nt of	Amount of Liability	¥		
9. S		Date Liability		٨	В	C	ם	m			1—		
٦,0	Creditor	Incurred mo/year	Type of Liability	\$10,001— \$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—	\$25,000,000 \$25,000,00 1	\$50,000,000 Over	\$50,000,000 Spouse/DC Liábility over
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				×						
	Bank of North Georgia Rental 1	July 2011	Mortgage on Kennesaw property			×			:			,	
	HSBC Bank Rental 2	August 04	Mortgage on Kennesaw property			×							
	Chase Bank Rental 3	Nov. 12	Mortgage on Kennesaw property				×						
	Chase Bank Rental 4	Dec. 12	Mortgage on Kennesaw property				×					. ,	,
	Discover	revolving	Credit card		×								

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 all nonotary nature.	aulo.
Position	Name of Organization

SCHEDULE III — LIABILITIES

Name Allan Levene

Page 7 of 7

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-

					SP, DC, JT	
- Land Control of the	And an incident and an inciden		Bank of America	Example: First Bank of Wilmington, DE	Creditor	
			revolving	May 1998	Date Liability Incurred mo/year	
	de la constantina del constantina de la constantina del constantina de la constantin		Credit card	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
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			×		\$15,001— \$50,000 W	I
					\$50,001— \$100,000	l
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				_	\$25,000,001	
	-	 		\vdash	\$50,000,000 Over	
				┞	\$50,000,000 Spouse/DC	

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

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 Position	Name of Organization
 President	Network Consultants, Inc.
 President	steam&sauna, inc.
Partner	Posit5, LLC