thics. Yes No V	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.	sets, "unearned" in: ? Do not answer "yo	Exemptions— Have you excluded from this report any other as because they meet all three tests for exemption	Ω
Yes	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 dependent child?	wed by the Committ details of such a trus	Trusts— Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain disclosed. Have you excluded from this report details of such a trust benefiting you, your s	=
Yes 🗌 No 🗸	tial Public Offering?	i as a part of an Initi	IPO Did you purchase any shares that were allocated as a part of an initial Public Offering?	₹
SE QUESTIONS	TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	OR TRUST II	IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR	PO a
	schedule attached for each "Yes" response		If yes, complete and attach Schedule V.	Ify
d and the appropriate	Each question in this part must be answered and the appropriate	Yes No	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	V. (ma
	If yes, complete and attach Schedule IX.		if yes, complete and attach Schedule IV.	fy
outside Yes V No	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes V No	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	V. Pep Did
	If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	Ŧ
iling in the Yes No	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes 🗸 No 🗌	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 VII.		If yes, complete and attach Schedule II.	lfy
han \$350 Yes 🗸 No 🗌	Did you, your spouse, or a dependent child receive any reportable travel or VII. relimbursements for travel in the reporting period (worth more than \$350 from one source)?	Yes U No	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	II. You
	If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	lf y
therwise Yes No	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	Yes V No	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	i. Orn
	QUESTIONS	OF THESE Q	PRELIMINARY INFORMATION ANSWER EACH	REL
late.	tion	☐ Termination	pe 🔲 Annual (May 15) 🌘 🗷 Amendment	Туре
more than 30 days	Termination Date:		94	Report
A \$200 penalty shall be assessed against anyone who files	Officer Or Employing Office: Employee		Member of the U.S. State: OH House of Representatives District: 1	Filer Status
(Office Use Only)	(Daytime Telephone)		(Full Name)	
3 EU 10 ENE 00 M			Steven J. Chabot	
Manager Control of the Control of th	1 to			
DELIVERED	For use by Members, officers, and employees	TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	CALE
HAND				

### **SCHEDULE 1 - EARNED INCOME**

Name Steven J. Chabot

Page 2 of 9

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 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.

Source	Туре	Amount
St. Xavier High School	Spouse salary	N/A
Payment for legal services performed while not serving as a Member of Congress	Attorney fees	\$2,000

4-	
w	
Ψ.	
$\Box$	
~	
7	
_	
Ш	
О	
_	
_	
_	
111	
_	
=	
_	
•	
,50	
ഗ	
ă.	
ശ	
Ш	
_	
_	
10	
U	
-	
-	
5	
_	
0	
_	
_	
-	
_	
_	
=	
Z	
_	
m	
5.1	
-	
~	
5	
$\simeq$	
_	
Ш	
0	
_	
=	
-	
_	
_	
_	
=	
$\Box$	
~	
$\sim$	
·	
_	
_	
_	

Frovide comprishe names of stackes and mutual funds (do not use bother symbols, for all IRAs and other retriement plans (purch as delig) plans of provide the value for tear such as activities, or the account in the a
--

E III - ASSETS AND "UNEARNED" INC
" INCOME
Name St

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Steven J. Chabot	Chabot		Page 4 of 9
	Charles Schwab & Co	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	Cintas common stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	Victory Money Market Fund	None	DIVIDENDS	\$1 - \$200	Ø
	Ohio Public Employees Deferred Compensation Vanguard Inst Index	\$15,001 - \$50,000	None	NONE	
	PNC Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	US Bank account	\$50,001 - \$100,000	INTEREST	\$1 - \$200	,
	AdvantageBank CD	None	INTEREST	\$201 - \$1,000	V
	Janus Fund IRA	\$15,001 - \$50,000	None	NONE	
	Natixis Fund IRA	\$15,001 - \$50,000	None	NONE	
	Finish Line common stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Mult Color Corp common stock	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
	Merit Medical Systems common stock	\$1,001 - \$15,000	None	NONE	
	Med Act Industries common stock	\$1,001 - \$15,000	None	NONE	
	Matrix Service Corp common stock	\$1,001 - \$15,000	None	NONE	

## S

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Steven J. Chabot	Chabot		Page 5 of 9
	Marine Products Corp common stock	\$1,001 - \$15,000	None	\$201 - \$1,000	
	Ohio Public Employees Deferred Compensation Guaranteed Return Option	\$15,001 - \$50,000	None	NONE	
	Gulf Island common stock	\$1,001 - \$15,000	DIVIDENDS	NONE	
	Ohio Public Employees Deferred Compensation Fidelity Magellan	\$15,001 - \$50,000	None	NONE	
	Encore (Denbury) common stock	\$15,001 - \$50,000	None	NONE	
	Daktronics common stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	CCA Industries common stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Bio Ref Labs common stock	\$15,001 - \$50,000	None	NONE	
	Ohio Public Employees Retirement System	\$50,001 - \$100,000	None	NONE	
	Sigmatron Intl Inc common stock	\$1,001 - \$15,000	None	NONE	
	K-Swiss Inc common stock	\$1,001 - \$15,000	None	NONE	

### **SCHEDULE IV - TRANSACTIONS**

Name Steven J. Chabot Page 6 of 9

between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. \* This column is for assets solely held by your spouse or dependent child.

		SP,
Victory Money Market Fund	AdvantageBank CD	Asset
S	S	Type of Transaction
No	No	Capital Gain in Excess of \$200?
3-19-12	7-28-12	Date
\$1,001 - \$15,000	\$50,001 - \$100,000	Amount of Transaction

# SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Steven J. Chabot Page 7 of 9

spouse or dependent child that is totally independent of his or her relationship to you. the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the

Heritage Foundation Feb 6-8 DC-Baltimore, MD-DC Y N None	Source	Date(s)	Point of Departure Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Prood? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
	Heritage Foundation	Feb 6-8	DC-Baltimore, MD-DC	Υ	~	Z	None

#### SCHEDULE IX - AGREEMENTS

Name Steven J. Chabot

Page 8 of 9

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.

Date	Parties To	Terms of Agreement
Dec 1985 - 1994	Ohio Public Employees Retirement System	Dates reflect period of paying into fund; eleigible for receipt upon retirement
May 1990 - Dec 1994	Ohio Public Employees Deferred Compensation	Dates reflect period of paying into fund; eligible for receipt after age 55 or upon retirement

FOOTNOTES	S	Name Steven J. Chabot	Page 9 of 9
Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Increased by transfer of funds from AdvantageBank CD	US Bank account