× ×	Yes 🔲	pendent child	iabilities of a spouse or dependent child he Committee on Ethics.	"unearned" income, transactions, or liab unless you have first consulted with the	earned" incom ess you have fi	his report any other assets, "un nption? Do not answer "yes" unl	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liab because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the
S S	Yes 🔲	of be	r "excepted trusts" need no	cs and certain other	mittee on Ethi	nd Trusts" approved by the Com port details of such a trust bene	<b>TRUSTS</b> —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?
ัง	QUESTION	F THESE (	ANSWER EACH OF THESE QUESTIONS		ST INFOR	EPENDENT, OR TRU	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" r	hedule attached for e	appropriate sch	d and the	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	Each question in thi
N <sub>o</sub>	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.	VI. Did you receive or a single source in the if yes, complete and	<b>⊗</b>	have any report- orting 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.
₩ K	Yes	angement	Did you have any reportable agreement or arrangement th an outside entity? yes, complete and attach Schedule V.	V. Did you have any re with an outside entity? If yes, complete and	<b>₽</b>	eceive "unearned" od or hold any end 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.
N <sub>o</sub>	Yes 🔲	efore the date r 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.	IV. Did you hold an of filing in the curre if yes, complete ar	N <sub>N</sub>	e (e.g., salaries or porting period? Yes	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?  If yes, complete and attach Schedule I.
			NS	SE QUESTIO	OF THES	N — ANSWER EACH OF THESE QUESTIONS	In all sections, please type or print clearly in blue or black ink.  PRELIMINARY INFORMATION — ANSW
	0 days late.	more than 30 days late				Employing Office:	
assessed who files	A <i>\$200 penalty</i> shall be a	A <i>\$200 pen</i> against any	Check if Amendment	1/4/14	Date of Election:	State: 0 K Pes District: S	Filer Candidate for the House of Representatives
	(Office Use Only)						
2	U.S. HOUSE OF HE BURNING	u.s. Hous		Daytime Telephone:		gene Fuild	Name: Thomas Eu
Page 1 of	Page 1 of SEDSHREE C.F. 2013 JUL - 3 PM 1: 42	2013	FORM B dates and new employees	FOR For use by candidates		REPRESENTATIVES ATEMENT - June 24, 2013	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - Jane 24, 2

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Thomas Eugene (Fuild Page Lot )

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.

<b>Exclude:</b> Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	ement programs, and benefits re	ceived under the Social	Security Act.
Source (include date of receipt for hopograpia)	Type	Amount	unt
Source (include date of receipt for florioralita)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
]	Monthly payment	12,000	30,000
TIAA/CREF	Monthly payment	5,000	12,000
	111	,	

## 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 For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the (do not use ticker symbols). Provide complete names of stocks and mutual funds more than \$200 in "unearned" income during the year. Asset and/or Income Source **BLOCK A** it generated income, the value should If an asset was sold during the reportplease specify the method used. method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of ing year and is included only because Value of Asset BLOCK B plans or IRAs), you may check the Check all columns that apply. For retirement accounts that do not "Tax-Deferred" column. Dividends, investments or that generate taxdeferred income (such as 401(k) allow you to choose specific Type of Income BLOCK C BLOCK D

reinvested, must be dis-

if the asset generated no income closed as income. Check "None" Interest, and capital gains, even

account that exceeds the reporting thresholds.

be "None."

## Amount of Income

income. Check "None" if no income was earned or generated and capital gains, even if reinvested, must be disclosed as income by checking the appropriate box below. Dividends, interest, check the "None" column. For all other assets, indicate the category of For assets for which you checked "Tax-Deferred" in Block C, you may

spouse or dependent child. \* This column is for income derived from assets solely held by your

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						≒	<u>0</u>	9	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 II requirements, please refer to the instruction booklet.	8	퓙진	ren Poor
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Thomas Eugene Guill Page 2

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\$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000

Spouse/DC Income over \$1,000,000\*

Continu	Continuation Sheet (if needed)			Maine / Homas Cuser Julla 1 age
	BLOCK A	BLOCK B	BLOCK C	ВГОСК D
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income
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	Franklin Trame Fuel	×		

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