UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	POSTMARK ILLEGIBLE
Name: MARTY Mcclason	Daytime Telephone:	2014 OCT 29 PM 2: 04
New Member of or Candidate for State: U.S. House of Representatives District: Candidates – Date of Election:	Check if Amendment	U.S. HOUSE OF THE CLERK CHERK (Office OSE PERSENTATIVES
STATUS New Officer or Employee Employing Office:	Period Covered: January 1,to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	F THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting period Yes No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No F. Do you have any reportable agreements or arrangements with an outside entity?	or arrangements with Yes No Ú
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	n \$5,000 from a single Yes No
ATTACH THE COR	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	S" D COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B	T INFORMATION - ANSWER BOTH OF THES	OTH OF THESE QUESTIONS
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 that benefits you, your spouse, or dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. In id?	lave you excluded from Yes No
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	윽	dependent child because they meet all three Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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					ABC Hedge Fund X	Examples: Simon & Schuster	Mega Corp Stock	EFF	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second tomes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	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 and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.	In the state of th	For all inclus 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 mulual funds. (do not use only ticker symbols).	"uneamed" income during the year.	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in	Assets and/or Income Sources	BLOCK A	SCHEDULE A – ASSETS & "UNEARNED INCOME"
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Use additional sheets if more space is required.

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SCHEDULE C - EARNED INCOME

Name: MARTY Maclason Page 1 힟

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 reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. Examples: Source (include date of receipt for honoraria) ABC Trade Association, Baltimore, MD (July 15)
State of Maryland
Civil War Roundtable, Richmond, VA (Oct. 2)
Ontario County Board of Education Honorarium
Salary
Spouse Speech
Spouse Salary Type **Current Year to Filing** \$20,000 \$0 N/A Amount Preceding Year \$76,000 \$1,000

SCHEDULE D - LIABILITIES

Name: MARY MCCLE-DO

Page S 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 your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

Creditor Creditor Creditor First Bank of Wilmington, DE 598 Mortgage on Rental Property, Dover, DE 10,000 11,000 15,500 15							 	Amount of Liability	of Ei		ability	ability	ability	ability
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude**: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report

positions held in the reporting period and the current calenda	positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.
Position	Name of Organization
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SCHEDULE

continuation or de Identify the date,

Date

∃ F – AGREEMENTS	Name: MAPH McChon	Page of 7
parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absen eferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welf	with respect to: future employment; a leave of absence during the pernment; or continuing participation in an employee welfare or benefit pla	nce during the period of government service; Ifare or benefit plan maintained by a former employer.
Parties to Agreement	Terms of Agreement	
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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C. Example: Source (Name and City/State) エぞく Doe Jones & Smith, Hometown, Homestate **Brief Description of Duties** Accounting Services

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