No.	Yes 🔲	ependent child	lities of a spouse or dependent child Committee on Ethics.		arned" income ss you have fir	other assets, "une answer "yes" unle	EXEMPTION —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	XENPTION—Have you e ecause they meet all three
No 🔀	Yes 🔲	ot be	xcepted trusts" need not be	s and certain other "ex	nittee on Ethic ting you, your	roved by the Communication	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted t disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?	RUSTS—Details regarding sclosed. Have you exclude
S	QUESTION	OF THESE (ANSWER EACH OF THESE QUESTIONS	ı	TINFOR	IT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	(CLUSION OF SP
	esponse.	each "Yes" re	schedule attached for each "Yes" response	appropriate sched	d and the a	t be answered	Each question in this part must be answered and the appropriate	Each que
N N	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 compensation of r a single source in the two prior years? If yes, complete and attach Schedul	₹	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.	Did you, your spouse, or a data liability (more than \$10,000 yes, complete and attach Sc
N _o	Yes	rangement	portable agreement or arrangement ttach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V	₹	od? 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.	Did you, your spouse, or a di come of more than \$200 in the portable asset worth more that yes, complete and attach Sc
S		реfore the date от <u>two</u> 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 any report filing in the current call figes, complete and at	S S	or 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.	Didyou or your spouse have as) 01-5200 or more from any yes, complete and attach Sc
plk				EACH OF THESE QUESTIONS	OF THES	ANSWER EACH	1	PRELIMINARY INFORMATION
						ık.	In all sections, please type or print clearly in blue or black ink	all sections, please type or p
Will Called	0 days late.	more than 30 days late				Employing Office:	:	Status New officer or employee
who files	A <i>\$200 penalty</i> shall be assessed	A <i>\$200 penalty</i> shall be	Check if Amendment	HOE/ 1883.	Date of Election:	NO PRICHENT	Candidate for the State: -4 House of Representatives District:	囟
·	(Office Use Only)	\mathcal{U}_{0}						
υ, -	PRESENTATIVES	OFFICE OF THE CLERK S. HOUSE OF REPRESENTATIVES	te:	Daytime Telephone	Daytime) Nivers	6 pamorst	Name: Oworan
Page 1 of	SOURCE CENTER	EGISLATIVE RESOURCE CENTER 2014 APR -2 PM 1: 25	A B and new employees	FORM For use by candidates a	7	NTATIVES	REPRESE ATEMENT	UNITED STATES HOUSE OF FINANCIAL DISCLOSURE ST

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

the conformation of the LLS Comment totaling \$200 or	Name DONG VAN LIBIVERS
	Page 2 of 1
2) <u>†</u>

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	entent programs, and benefits i	Amount	unt
Source (include date of receipt for nonoraria)) lype	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
King Cant Metro	Salary	#115,000,00	* 634,84
			-

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

	جر م	CHASE Hereways	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	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.	location in Block A.	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 decorraphic	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.	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. Provide complete names of stocks and mutual funds (do not use ticker symbols).	BLOCK A Asset and/or Income Source
		X	×	Indefinite	X	None \$1 \$1,000 \$1,001 \$15,000 \$15,001 \$50,000 \$50,001 \$100,000 \$250,001 \$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 \$25,000,001 \$50,000,000 Cver \$50,000,000 Spouse/DC Asset over \$1,000,000*		B C D E F G H L K L M	it generated income, the value should be "None." *This column is for assets solely held by your spouse or dependent child.	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. If an asset was sold during the reporting year and is included only because	BLOCK B Value of Asset
	>		×	Royalties	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)		interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments <u>or</u> that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" column. Dividends .	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 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Cver \$5,000,000 Spouse/DC Income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$50,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$50,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Cver \$5,000,000 Spouse/DC Income over \$1,000,000*	11X 1X X X X 1111 1 1 1 1 1 1 1 1 1 1 1	Current Year Preceding Year	* This column is for income derived from assets solely held by your spouse or dependent child.	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 income . Check "None" if no income was earned or generated.	BLOCK D Amount of Income

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

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SCHEDULE III — LIABILITIES

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Page 5_ of /

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); 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 a spouse, or the child, parent, or sib-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 ling 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.

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			under \$ 7 000,00 (Des	All Liabilities one	Example: First Bank of Wilmington, DE	Creditor	
			-		May 1998	Liability Incurred mo/year	Date
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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);

Donovano Clemning, Painting & Loudsupens	Foundal Leo
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All Clergy All Community Advisory Coancil	Founder/ceo "
Name of Organization	Position

SCHEDULE V -- AGREEMENTS

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	Storly Danomis Cleaning	Inside out having	Admilye 1	King County Metro	Parties To	Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employ service; continuation or deferral of payments by a former or current employer other than the U.S. Government; effit plan maintained by a former employer.
	Leave & Wysen	Leave of Absence	Leave of Absence	to be arranged of the elected	Terms of Agreement	respect to: future employment; a leave of absence during the period of government an the U.S. Government; or continuing participation in an employee welfare or ben-

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.

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			NONE GUD	Example: Doe Jones & Smith, Hometown, Homestate	Source (Name and Address)	lecognized by law. Do not repeat information have on ochedule i.
				Accounting services	Brief Description of Duties	

GPO: 2013

78-995 (mac)

CAMPAIGN NOTICE REGARDING FINANCIAL DISCLOSURE REQUIREMENT CE CENTER

If you have not yet raised (either through contributions or loans from your left of PR -2 PM 1: 28 others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

OFFICE OF THE CLERK
LS.HOUSE OF REPRESENTATIVES

The Honorable Karen L. Haas, Clerk
Office of the Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, DC 20515-6601

Indicate Your Status: (Select One)	Dear Madam Clerk:						
	This is to notify you that I have not yet raised (either through contributions or loans from myself						
Over \$5,000 Threshold Not	or others) or spent in excess of \$5,000 for my campaign for the U.S. House of Representatives.						
Exceeded	I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file a Financial						
	Disclosure Statement with the Clerk of the House of Representatives according to the deadlines						
	set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a copy of which has been						
	provided to me by the Clerk.						
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•	This is to notify you that under the laws of the state of,						
Withdrawal	I withdrew my candidacy for the U.S. House of Representatives on						
of Candidacy							
	[Note: If your Financial Disclosure Statement was due before the date on which you withdrew						
	from the race, you still must file a Financial Disclosure Statement with the House.						
	Name (Please Print or Type): State: WAS Hing tow District: 9 Date: 43/14/2014						

(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO: The Clerk, U.S. House of Representatives Legislative Resource Center B-106 Cannon House Office Building Washington, DC 20515-6601