

× X	ndent child Yes	e, transactions, or liabilities of a spouse or deperst consulted with the Committee on Ethics.	arned" incomess you have fir	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.
N _o	oe Yes	s and certain other "excepted trusts" need not to spouse, or a dependent child?	nittee on Ethic ling you, your	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?
୮ଊ	THESE QUESTION	MATION — ANSWER EACH OF THESE QUESTIONS	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	e attached for each "Yes" response.	appropriate schedule attached for ea	and the a	Each question in this part must be answered and the appropriate schedul
No 🔀	000 from Yes	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.	× ⊠	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.
S ⊠	gement Yes	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	₹	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? Yes Yes
No X	re the date Moyears? Yes	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.	S _S	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 Yes Yes
		E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
	more than 30 days late.			employee Employing Office:
assessed who files	A \$200 penalty shall be assessed against any individual who files	Nov 6 2012 Check if Amendment	Date of Election:	Filer Candidate for the State: 756 House of Representatives District: 366 Status New officer or
	(Office Use Only)	Daytime Telephone: 225 -) 555	Daytime	Name: Here Anckman
AUVEC	U.S. HOUSE OF REPRESENTATIVES			Δ -
10	2013 APR 11 PM 3: 10	For use by candidates and new employees		Period covered: January 1, 2012 - Dec 31, 2012-
age 1 of 3	FRISH ATIVE RESOURCE CENTING	7>51		UNITED STATES HOUSE OF REPRESENTATIVES

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Flive Stock MAN

Page $\mathcal V$ of $\mathcal J$

ist 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	
nore 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	
xceeding \$1,000. See examples below.	
"xelude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act	

Source (include date of receipt for honoraria) Type	13	Amount
•		
XYZ Corporation, Houston, TX	Salary	
	Director's Fee	
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	
Harris County, Texas Public Schools	Spouse Salary	
NASA	Sporse Salary	
Prosidential Trist Marketi	Tes sum	'
		\

Name

	Con acp phillips		Examples:	SP, Mega Corp. Stock	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.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental	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 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 "unearmed" income during the year.	Asset and/or Income Source	BLOCK A
	×	×			None \$1 - \$1,000 \$1,001 - \$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 \$25,000,001 - \$50,000,000 Over \$50,000,000 Spouse/DC Asset over \$1,000,000*		B C C D E F G S H C K K K K 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.	it generated income, the value should be "None."	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.	Value of Asset	BLOCK B
		×	Royaties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm In	ncome		during the reporting period.	interest, and capital gains, even if reinvested, must be disconsciosed as income. Check "None" if the agent apparated to income.	plans or IRAs), you may check the "Tax-Deferred" column. Dividends,	Check all columns that apply. For relirement accounts that do not allow you to choose specific investments <u>or</u> that generate taxdeterred income (such as 401(k))	Type of Income	BLOCK C
		×	×		None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$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 \$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 \$1,000,001 - \$5,000,000 Over \$5,000,000		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	Amount of Income	BLOCK D