No X	Yes 🔲	pendent child	s, or liabilities of a spouse or dependent child with the Committee on Ethics.	"unearned" income, transactions, or liabil unless you have first consulted with the C	erned" incon	er assets, "une wer "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
No X	Yes 🔲	of be	other "excepted trusts" need not dependent child?	iics and certain ir spouse, or a	mittee on Eth iting you, you	id by the Coming a trust benef	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?
Ø	QUESTION	F THESE (ANSWER EACH OF THESE QUESTIONS 	RMATION	T INFOF	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" r	schedule attached for each "Yes" response.	appropriate	d and the	e answered	Each question in this part must be answered and the appropriate sched
N _O	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 com a single source in the tw If yes, complete and at	» X	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.
N _O	Yes 🔀	angement	 V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V. 	V. Did you have any rep with an outside entity? If yes, complete and a	S S	Yes X	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 _S	Yes 🔀	efore the date r <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 he of filing in the If yes, comple	S S	Yes X	l. 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.
			TIONS	EACH OF THESE QUESTIONS	OF THE	ER EACH	PRELIMINARY INFORMATION — ANSWER
							Is all continue whose the substitute blank in the substitute into
who files	against any individual v more than 30 days late.	against any individual more than 30 days late	Amendment	d	Liecucii.	Office:	New officer or employee
assessed	A \$200 penalty shall be assessed	A \$200 pen	Check if	Med 1	Date of Election	134	Filer Candidate for the State:S
Šie C	U.S. HOUSE OF REPAESENTATIVES (Office Use Only)	0.5. HO DOE DE)					
TEI	2013 KAR 20 PM 1:21	2013 MAR 2		Daytime Telephone:	Daytim		Name: Elizabeth Colbart Busch
Page 1 of	12 2013	MAR 1	FORM B ndidates and new employees	FORI For use by candidates		ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, でいっしい。

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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Elizabeth Glant Bush Page 2

of 8

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

Source (include date of receipt for honoraria)	Type	Amount	unt
	. 700	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
Clemson University Clamson, SC	Seder	a4629.30	114568.90
	C		
AZ East him Churkeston, SC	Spouse Sides	Z/A	7
	C		5 5 5 9 9 9

the Rock	1>	Goldman Secho Goodh Men	Coca Cala Stank	المادة الا	Pership Money Market IRA	JT 1st Bank of Paducah, KY accounts	Examples:	SP, SP Mega Corp. Stock	that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. 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.	For an ownership interest in a privately-held business	provide only the name of the institution noting the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address.	Asset and/or income Source 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). For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, in the former than the provide the institution belief in the specific was the provide of the institution belief the provide on the self-directed.
×	×	×	×	*	×	×	Indefinite	×	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 Qver \$50,000,000		A B C D E F G H I J K L	BLOCK B Value of Asset 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 it generated income, the value should be "None."
×	×	×	×	×	×	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	come)		Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
У	×	×	*	*	×		X	×	\$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$100,000		Current Year Preceding Year	Amount of Income 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.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Page 4 of 8

	4	95	50	0 5	35	38	35							В Н	လ က	
1	Thermo Fischer Scientific	Motorala Stock	Kraft Stock	GE 54=JL	Ford Shock	les: dentited auch mone	Reghmy Money Mickel	Wells Fergo Swings	الحاك	Oppunhime Shhush Vidux Fund	, –		Delawers Indurational			BLOCK A Asset and/or Income Source
*	×	×	×	×	×	×	×	*	У	×	×	×	<i>x</i>	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 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000	A B C D E F G H I J K L	BLOCK B Value of Asset
<i>x</i>	×	×	×	×	×	**	*	×	×		**	×	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		BLOCK C Type of Income
у	× ×	× ×	× ×	*	×	×	×	× ×	× ×	×	×	*	X	None	Current Year Preceding	BLOCK D Amount of Income

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Elizabeth Colbert Busch Page 5 or 8

C intinu	C intinuation Sheet (if needed)		Z	Name #12 25 eth Colburt Dusin Page 2 of 8
	BLOCK A	вгоск в	вгоск с	BLOCK D
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income
SP,		ABCDEFGHIJKL	е	Current Year Preceding Year
} . 1		00 000 000 0,000 00,000 000,000 0,000,000	O TRUST	× 000 × = = = = = = = = = = = = = = = = = = =
PC		None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$250,001 - \$500,00 \$250,001 - \$500,00 \$500,001 - \$1,000, \$1,000,001 - \$5,00 \$25,000,001 - \$5,00 \$25,000,001 - \$50,00	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TAX-DEFERRED Other Type of Incon (Specify: e.g., Partners or Farm Income)	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$5,000 \$50,001 - \$1,000 \$100,001 - \$5,000,000 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$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
95	على على الم	X	х	X
50	Johnson + Johnson	24s	*	~
30	16 m	><	×	×
50	Pficus	×	×	×
*	Mondelve	*	×	X
4	Wulls Fergo	×	×	× × × × × × × × × × × × × × × × × × ×
	Marise 124	X	×	×
99	multar lea	×	× ×	X
			-	

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SCHEDULE III — LIABILITIES

Name Elizabeth Colhart Bush

Page 1_ of 8

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniling 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 ture, 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

		 		
				SP, DC, JT
			Example: First Bank of Wilmington, DE	Creditor
			May 1998	Date Liability Incurred mo/year
			Mortgage on 123 Main Street, Dover, DE	Type of Liability
				\$10,001— \$15,000
				\$15,001— \$50,000
				\$50,001— \$100,000
	-		×	\$100,001— \$250,000 D
				\$250,001— m \$500,000
				\$250,000 m s250,000 m s500,000 m s1,000,001 m s1,000,000 m s5,000,000 m s6,000 m s6,
				\$5,000,001—
				\$25,000,001— ± \$25,000,001—
■ 1				\$50,000,000
				Over

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-

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature.

and positions solely of all floridiary flature.	iature.
Position	Name of Organization
Director 100 mal	Propollor Club Port of Charleston
Advisor Bright	Charliston School et hans maritime hustitute
College of Charleston	School of the Fire Arts
Strang Conther	Charlishan Madro Charles at Commore Warld Trade Cardes Chrobest on
Advoca Burd	

Use additional sheets if more space is required.

SCHEDULE V — AGREEMENTS

Name Elizahath Colbart Busile Page 8 or 8

efit plan maintained by a former employer. 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 ben-

Date	Parties To	Terms of Agreement
3 27 13	Clemoon Chimesity Clemson SC	Unpaid beaute to alogune during election
		0

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.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hornetown, Homestate	Accounting services

GPO: 2012

72-584 (mac)