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§ ×	Yes	lependent child	lities of a spouse or dependent child Committee on Ethics.	"unearned" income, transactions, or liabi unless you have first consulted with the	arned" incom ss you have t	er assets, "une wer "yes" unle	EXEMPTION —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	EXEMPTION Have because they meet all
× ×	Yes	not be	xcepted trusts" need r	ics and certain other "e r spouse, or a depende	nittee on Ethi ting you, you	ed by the Comr	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?	TRUSTS—Details r disclosed. Have you
S	E QUESTIONS	OF THESE	SWER EACH OF	- A	ST INFOR	OR TRUS)F SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION OF SPOUSE,
	" response.	each "Yes"	lule attached for each	appropriate sched	and the	answered	Each question in this part must be	Ea
S	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	× ×	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.	III. Did you, your spot able liability (more than If yes, complete and
× ×	Yes	rrangement	portable agreement or arrangement ttach Schedule V.	V. Did you have any rewith an outside entity? If yes, complete and a	₹	¥ ×	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.	II. Did you, your spou income of more than the reportable asset worth If yes, complete and
No	Yes 🔀	before the date or two years?	portable positions on or before the date alendar year or in the prior two years?	IV. Did you hold any rep of filing in the current ca if yes, complete and at	N _o	Yes 🗙	 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. 	i. Did you or your spo fees) of \$200 or more if yes, complete and
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assessed who files	– •	A \$200 pe against a	Check if Amendment	n: AFRIL 2012	Date of Election:	19-14 19-14	Candidate for the State: 10 House of Representatives District:	Filer Status
VES V	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	u.s. House o						
<u> </u>	VII PHIZ: 10	2012 JAN 1 1		Telephone:	Daytime		FELICIA HARRIS	Name: KL
3890 1 of 	TJAN - 5. 2012 LEGISLATIVE RESOURCE CENTER	LEGISLATIV	M B and new employees	FORM B		ATIVES	E OF REPRESENT RE STATEMENT AOJO - DECEMBER	FINANCIAL DISCLOSUI Period covered: January 1,

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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name FELICIA HARRIS

Page 2 of 7

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) XYZ Corporation, Houston, TX First Bank & Trust, Houston, TX XYZ Trade Association, Chicago, IL (Rec'd December 2) Harris County, Texas Public Schools SWTWERLAND, RSOILL & BARNIAN LLP (Hous(ON) TK) CHY OF PEARLAND (PEARLAND, TK) NOODMAY FINANCIAL ADVINSES (HOUTTM), TX	Salary Director's Fee Honorarium Spouse Salary SALARY DETECTOR SOME SALARY CONTICL WEST SALARY ADVISORY BLANCO FEE	Amount Current Year to Filing \$6,300 \$400 0 NA \$400 \$200	Preceding Year \$28,450 \$3,200 \$1,000 NA \$253,420
WOODWAY FINANCIAL ADVISORS (HOUTHN, TX)	ADVISORY BOARD FEE	\$200	N/A

AMERICAN FUND OF	FREST PAGE	Designation of the state of the	INVESCO	FIDELITY NEW IN	AMPRICAN FUND OF	JT.	Examples:	SP,	For an ownership interest in a pri that is not publicly traded, state it ness, the nature of its activities, tocation in Block A. Exclude: Your personal resident homes and vacation homes (unit income during the reporting perioding \$5,000 or less in personal accounts; and any financial interest of from, a federal retirement derived from, a federal retirement the Thrift Savings Pian. If you so choose, you may indicating the political income source is that of your spoent child (DC) or is jointly held with the optional column on the far left. For a detailed discussion of Scheoplease refer to the instruction bool	For rental or other real pro provide a complete address.	account and its ve	reportable asset or sources more than \$200 in "unearne Provide complete names o (do not use ticker symbols). For all IRAs and other retire plans) that are self-directed have the power, even if not a cific investments), provide the in the account that exceed For retirement accounts we provide only the name of	identify (a) each a of income with a	Asset au
77	CED) GLE BLOGAL FUND CLASS A	designations and of a designation of a designation of the designation	NNESCO ENERGY FUND CLASS A(M)	NEW INSIGHTS FUND CLASS A (IIA)	F AMERICA CLASS A (IRA)	1st Bank of Paducah, KY accounts	Simon & Schuster	SP Mega Corp. Stock	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 tocation 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 (ess 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 III requirements, please refer to the instruction booklet.	For rental or other real property held for investment, provide a complete address.	account and its value at the end of the reporting period.	reportable asset of sources of income which generated reportable asset of 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, convide only the name of the institution holding the	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at	BLOCK A Asset and/or Income Source
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							Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Incom	e)		allow you to choose specific investments or that generate taxdeferred income (such as 401(k) plans or IRAs), you may check the "None" 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.	Check all columns that apply. For retirement accounts that do not	Type of Income
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		-		 	<u> </u>			\dashv		1 !	œ i	ate tax-deferred income (such as 401(k) plans or IRAs), 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 discipled as income. Check "None" if no income was earned or generated.	For retirement accounts that do not allow you	
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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						7,7			1. 2.3					Over \$2,000,000						

SCHEDULE III — LIABILITIES

Name FELICIA HARRIS

Page 6 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 dependent child. Mark the highest amount owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furnitively. 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. 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-

Example: First Bank of Wilmington, DE	SP, Creditor	
Example: First Bank of Wilmington, DE	Creditor	
May 1998	Liability Incurred	7,245
Mortgage on 123 Main Street, Dover, DE	Type of Liability	
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\$50,00 Over \$50,00		$\left\{ \ \right\}$

SCHEDULE IV — POSITIONS

cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, 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

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Position	and positions solely of an fioriorary nature.
8be schednle I	nature.
Name of Organization	

SCHEDULE V - AGREEMENTS

Name FELICIA HARRIS Page.

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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-

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Date				
Parties To		-		
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Terms of Agreement				i
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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.**