UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1,&の人3 - 1/- ネケーシャ人ろ	FORM B For use by candidates and new employees	1.EGISLATIVE RESOURCE CENTER 2013 DEC 1 PM 12: 27	ge 1 of 494 ENTER
Name: Aubert T. Zerban	Daytime Telephone:	U.S. HOUSE OF REPRESENTATIVES	ATIVES
Filer Candidate for the House of Representatives District: Status New officer or Employing Office:	Date of 11/4/2014 Check if Election: 11/4/2014	A <i>\$200 penalty</i> shall be against any individual more than 30 days late.	assessed who files
in all sections, please type or print clearly in blue or black ink.			
PRELIMINARY INFORMATION — ANSWER EACH O	- ANSWER EACH OF THESE QUESTIONS		
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, complete and attach Schedule I.	No 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.	on or before the date the prior two years? Yes	No.
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 If yes, complete and attach Schedule II.	No V. Did you have any reportable agreemen with an outside entity? If yes, complete and attach Schedule V.	portable agreement or arrangement Yes Itach Schedule V.	₹
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes, complete and attach Schedule III.	No XI. 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.	e than \$5,000 from Yes	₹
Each question in this part must be answered and the appropriate sched	and the appropriate schedule attache	ule attached for each "Yes" response.	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	— ANSWER	EACH 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 benefiting you, your spouse, or a dependent child?	ee on Ethics and certain other "excepted trusts" r g you, your spouse, or a dependent child?	need not be	N N
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.	ned" income, transactions, or liabilities of a spous you have first consulted with the Committee on E	e or dependent child Yes	No No

SCHEDULE I—EARNED INCOME (INCLUDING HONORARIA)

Name Robert Zerbun

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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.

								MNIEW COllege	Harris County, Texas Public Schools	XYZ Trade Association, Chicago, IL (Rec'd December 2)		XYZ Corporation, Houston, TX	Cource (include date of receipt of floriolaria)	College (include eleteration propriet for homograph)	Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.
							Spense Salay	Speuse Salary	Spouse Salary	Honorarium	Director's Fee	Salary	- ype	Type	ement programs, and benefits re
. !						•	25,000	35,000	NA	0	\$400	\$6,300	Current Year to Filing	Amount	eceived under the Social S
									NA	\$1,000	\$3,200	\$28,450	Preceding Year	unt	ecurity Act.

		Edward Wines Acc	Lenstar Dioperties	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	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 cliscussion of Schedule II requirements, please refer to the instruction booklet.	location in Block A. Exclude: Your personal residence including se	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	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 contribut bresholds	Provide complete names of stocks and mutual funds (do not use ticker symbols).	Identify (a) each asset heid 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.	Asset and/or income Source	BLOCK A
		."	^	unts			None		>						
		7	*	×	Indefinite	X	\$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,901 - \$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 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000		8 C C C C C C C C C C C C C C C C C C C	*This column is for assets solely held by your spouse or dependent child.		If an asset was sold during the report-	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
		7	>	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	me)		if the asset generated no income during the reporting period.	interest, and capital gains, even if reinvested, must be disclosed as income. Check "None"	plans or IRAs), you may check the "Tax-Deferred" column. Dividends ,	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate taxdeferred income (such as 401k).	Type of Income	BLOCK C
		7	*	×	×		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 Over \$5,000,000 Spouse/DC income over \$1,000,000*	III IV V VI VIIVIII 8X X XI XII	Current Year		* This column is for income derived from assets solely held by your spouse or dependent child.	Income. Check "None" if no income was earned or generated	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
		*	*	×	×	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 Over \$5,000,000 Spouse/DC income over \$1,000,000*	II III IV V VI VII VIII IX X XI XII	Preceding Year		d from assets solely held by your	was earned or generated.	Tax-Deferred" in Block C, you may rer assets, indicate the category of e box below. Dividends, interest, vested. must be disclosed as	f Income	X D

SCHEDULE III — LIABILITIES

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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. 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 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-

				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 D	
				\$50,001 \$100,000 O	
	-	, .	×	\$100,001— \$250,000 □	
				\$500,000 ITT \$500.001—	Amou
			L	\$1,000,000	nt of I
				\$1,000,001— \$5,000,000 • • • • • • • • • • • • • • • •	Amount of Liability
			\vdash	\$25,000,000 - \$25,000,001 \$50,000,000 -	
				Over \$50,000,000	
				,,	

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 1; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

and positions solely of all illoholary fiature.	alure.				
Position		Name	Name of Organization		
Disconsin Business Allinguer	~; swoJs1 (M	Business Al	لازم مدحر		
Board Member	Wisconsia bague	trague of	of Conseivation Voters	voters	