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UNITED STATES HOUSE OF REPRESENTATIVES 2013 FINANCIAL DISCLOSURE STATEMENT		Form A Form A LEGISLATIVE RESOURCE CENTER
		2015 MAR 30 AM II: 30
Name: SEAN PATRICK DUFFY	Daytime Telephone: (715)	715) 491-2345 OFFICE OF REPRESENTATIVES
		(Office Use Only)
FILER X Member of or Candidate for State: SYATUS U.S. House of Representatives District	WI	Officer or Employing Office: Employee
REPORT 2013 Annual (Due May 15, 2014)	X Amendment	Termination Date:
PRELIMINARY INFORMATION - ANSWER EACH OF T	THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting pendo? or b. Make more than \$200 in unearned mooms from any reportable asset during the reporting period?	Yes X No F Did yourside e	F Did you have any reportable agreement or arrangement with an ves No X was de entity during the reporting penod or in the current calendar ves No X
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any secunties or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes X No G. Did yo reportable source d.	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single Yes No X Source during the reporting penod?
C Did you or your spouse have "earned" income (e.g., salanes, honorana, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes X No H. Did yo reportable \$350 in v	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than ves X No \$350 in value from a single source during the reporting period?
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes X No l. Did any individue heu of paying you reporting period?	Did any individual or organization make a donation to chanity in lieu of paying you for a speech, appearance, or article during the Yes No X reporting period?
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes No X ATTAC	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO, EXCLUSION OF SPOUSE, DEPENDENT, O	OR TRUST INFORMATION - ANSWER	- ANSWER EACH OF THESE QUESTIONS
IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? the Committee on Ethics for further guidance.	al Public Offering during the reporting peri	iod? If you answered "yes" to this question, please contact Yes No X
TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be distins report details of such a trust that benefits you, your spouse, or dependent child?	mittee on Ethics and certain other "exceptent child?	led trusts' need not be disclosed. Have you excluded from Yes No X
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.	armed" uncome, transactions, or tiabilities of with the Commuttee on Ethics	tiabilities of a spouse or dependent child because they meet all three Yes $igwedge X$

SCHEDULE C - EARNED INCOME

	Name:	
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INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "serior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the remoting period. For a source, list		
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Source (include date of receipt for honoraria)	Type	Amount
Nema Sirie	Approved Teaching Fee	\$6,000
Examples: Continue (Oct. 5)	Spouse Speech	\$1,000
THE LIBRE INITIATIVE TRUST	SPOUSE INCOME	N/A
AMERICAN BROADCASTING CO	SPOUSE INCOME	N/A

SCHEDULE D - LIABILITIES

Name: SEAN PATRICK DUFFY

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent if out or are a Member); toans secured by automobiles, household furniture, or appliances, liabilities of a business in which you own an interest (unless you are personally liabile); and liabilities owed to you by a spouse or the child, parent, or sibling of you or yourse, Report a revolving charge account (i.e., credit card) only if the balance at the close of reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

_	_				Amount of Liab	Amount of Liability	Amount of Liability
	Type of Liability 10,001- 15,000 > 15,001- 15,000-	Type of Liability 110,001- 115,000 > 115,001- 150,000 © 150,000 ©	10,001- 15,000 > 15,000 = 50,000 = 50,001- 100,000 =	Type of Liability 10,001- 15,000 > 15,001- 50,000 © 100,001- 100,000 ©	Type of Liability 10,001- 15,000 > 15,001- 150,000 C	Type of Liability 110,001- 115,000 > 115,001- 150,000 © 150,000 ©	10,001- 15,000 > 15,001- 50,000
	15,001- w	115,001- 150,000 B 150,001- 1100,000 C	15,001- 50,000 © 50,001- 100,000 °	15,001- 50,000	15,001- 50,000 ¹⁵ 30,001- 100,000 ¹⁵	115,001- 150,000 00 150,000 00 100,000 00 1250,000 m 1250,000 m 1500,000 m 1500,000 m 1500,000 00 1500,000 00 15000,000 00 15000,000 00 15000,000 00 15000,000 00	15,001- 50,000 50,001- 100,000 250,000 250,000 7 1,000,001- 1,000,000 1,000,001- 5,000,000 25,000,000 25,000,000 25,000,000 25,000,000
	5,001- 0,000 ¹⁰	5,001- 0,000 °° °° °° °° °° °° °° °° °° °° °° °°	5,001- 0,000 °° °° °° °° °° °° °° °° °° °° °° °°	5,001- 0,000 0,001- 00,000 00,001- 50,000	5,001- 0,000 0,001- 00,000 00,001- 50,000	5,001- 0,000 0 0,001- 00,000 0 50,000 0 50,001- 00,001- 000,001- 000,001- 000,001-	5,001- 0,000- 0,000- 00,000- 50,000- 50,000- 50,000- 00,001- 000,001- 000,001- 000,001- 5,000,000- 5,000,001- 5,000,001-
	50,001-	\$50,001- \$100,000	50,001- 100,000 C	50,001- 100,000 0 100,001- 250,000	50,001- 100,000 C	\$50,001- \$100,000	\$0,001- 100,000 0 100,001- 250,000

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, morprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions consultant or positions held in any religious, social, fratemal, or political entities (such as political parties and campaign organizations); and positions soliely of an honorary nature. Position Name of Organization