



Filing ID #10002003

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Mr. Robert A. Brady
Status: Member
State/District: PA01

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2013
Filing Date: 05/15/2014

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Brigadoon Motel, LLC, Motel Wildwood, NJ	SP	\$15,001 - \$50,000	None		<input type="checkbox"/>
Carpenters Pension		\$250,001 - \$500,000	pension	\$15,001 - \$50,000	<input type="checkbox"/>
City of Philadelphia		\$50,001 - \$100,000	pension	\$5,001 - \$15,000	<input type="checkbox"/>
D&B Investment, Inc	SP	\$1 - \$1,000	pension	None	<input type="checkbox"/>
PA Turnpike		\$15,001 - \$50,000	pension	None	<input type="checkbox"/>
Philadelphia Federal CU		\$500,001 - \$1,000,000	Interest	\$5,001 - \$15,000	<input type="checkbox"/>
Philadelphia Federal CU	SP	\$250,001 - \$500,000	Interest	\$1,001 - \$2,500	<input type="checkbox"/>

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Philadelphia Redevelopment Authority	Spouse Pension	N/A
Philadelphia Writ Services	Spouse Salary	N/A
Independence Blue Cross	Spouse Salary	N/A
City of Philadelphia	Pension	\$8,727
Carpenters Pension Fund of Philadelphia	Pension	\$17,294

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

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 dependent child?

☐ Yes ☒ No

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?

☐ Yes ☒ No

COMMENTS

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Mr. Robert A. Brady , 05/15/2014