I FOIST VIVE	I FRISLATIVE RESOURCE CENTER	MES
Period covered: January 1, フシュラ・シャビモルほうによう こころ For use by candidates and new employees のようしましまします。 Page 1 of For use by candidates and new employees のようしまします。 これには、	2014 HAR 12 PM 2: 34	
Name: Daytime Telephone: NAR - 4 2014	4 2014	
(Offi	Office Use Only)	5
Filer Candidate for the State: \-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-	y shall be as	sessed
Employing Office:	1 -	Wino mes
PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS		
I. Did you or your spouse have "earned" income (e.g., sataries or fees) of \$200 or more from any source in the reporting period?  Yes Volume IV. Did you hold any reportable positions on or before the date of filling in the current catendar year or in the prior two years?  If yes, complete and attach Schedule IV.		S S
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 With an outside entity? With an outside entity? If yes, complete and attach Schedule V.	Yes 🔲	₹ \_
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  Yes No Bid you receive compensation of more than \$5,000 from a single source in the two prior years?  If yes, complete and attach Schedule III.	es	\$ \(\frac{1}{2}\)
Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	ponse.	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	JESTIONS	
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?	Yes 🗌	<b>₹</b>
<b>EXEMPTION</b> —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.	Yes	<b>₹</b>

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name DANIELT, ROCKE

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 bene	ement programs, and benefits	ritis received under the Social Security Act.	ecurity Act.
Source (include date of receipt for honoraria)	Type	Amount	
	-46.	Current Year to Filling	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	N
CME CLOUP	Saran	142,000	140,000

### SCHEDULE II — ASSETS AND "UNEARNED" INCO

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	Page 3 of 4

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E X	197	42/12x		1 <b>7</b> 0 ~	Mederic Crock Gross		SP Mega Corp. Stock	Exceuses: Your personal reacence, including second homes and vecation homes (unless there was revisal 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 reference, program, including the Thriff Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or departient 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.	location in Block A.	for an ownership interest in a privately-held business that is not publicly traded, state the name of the business	For rental or other real property held for investment, provide a complete address or a description, e.g., "rentel property," and the city and state.	For all IRAs and other retirement plans (such as 401(t) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	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 staet or sources of income which generated more than \$200 in "unearmed" income during the year.	Asset and/or income Source	BLOCK A
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

#### SCHEDULE III — LIABILITIES

Name	
Daniel T. Rocke	
Page Sot &	

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

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<b>ኳ</b> ይ	Creditor	Incurred molyear	Type of Liability	\$10,001— \$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	Over \$50,000,000	Spouse/OC Liability over \$1,000,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				$\vdash$	H			H		
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#### SCHEDULE IV -- POSITIONS

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 officer, 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.

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 or an inclinity nature.	NEW C.
Position	Name of Organization
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#### SCHEDULE V - AGREEMENTS

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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 benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

# 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.

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

GPO: 2013

78-995 (mac)