	Nics. Yes No No	ome, transactions, or liabilities of a spouse or dependent child s" unless you have first consulted with the Committee on Ethics.	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities because they meet all three tests for exemption? Do not answer "yes" unless you have first consul
	Yes U No	e on Ethics and certain other "excepted trusts" need not be benefiting you, your spouse, or dependent child?	Frusts Details regarding "Qualified Blind Trusts" approved by the Committee on Ethice 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 🕃	il Public Offering?	*Odjunden of the part of an initial Public Offening of the search of the common of the
	SE QUESTIONS	INFORMATION ANSWER EACH OF THESE QUESTIONS	IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST IN
			If yes, complete and attach Schedule V.
	and the appropriate	Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability (more Yes V han \$10,000) during the reporting period? Yes
		If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.
	outside Yes 🚱 No 🖂	Did you have any reportable agreement or arrangement with an outside IX. entitly?	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Yes 📝 No 🗌
		If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule III.
	ing in the Yes KS No □	uid you note sily reportative positions on or before the date of himg in the VIII. current calendar year?	III. more than \$200 in the reporting period or hold any reportable asset worth Yes . No
		if yee, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
	le travel or Yes : No 🗸	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (wordt more than \$350 from one sources).	II. you for a speech, appearance, or afficie in the reporting period? Yes: No
		If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
	Mos Yes No 🗸	Did you, your spouse, or a dependent child receive any reportable gift in the Vt. reporting period (i.e., aggregating more than \$350 and not otherwise	Did you or your spouse have "samed" income (e.g., salariss or fees) of \$200 Yes 🕢 No 📋
-		JESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS
	more than 30 days late.	Termination Date: on	Report (Annual (May 15)
	be assessed against	Employee	House of Representatives District: 4th
	A \$200 penalty shall	Officer Or Employing Office:	Files Wember of the U.S. State: TX
	(Offige, Use (Only)	(Daytime Telephone)	(Full Name)
PM 4: 05	2013 MAY -8		Raiph M. Hall
SCURCE OF MIX.			
		FORM A Page 1 of 8 For use by Members, officers, and employees	CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT
į			

Source Type Amount	, Y7, UUU,	Amount	Туре	Source
	Source	\$65,748	Legislative Pension	9 State of Texas
To during the preceding calendar year. For a spouse, list the source and amount or any noncerns; list only the source for owner spouse earned income exceeding		ent by the U.S. Government, totaling you or more	om any source (other than the mer a current employm	List the source, type, and amount or samed income from any source tozier than one file a current employment by the U.S. Government source and or more

SCHEDULE I - EARNED INCOME

Name Ralph M. Hall

Page 2 of 8

May.	7. 2013	11:29AM	The Ca	ruth				No.	9649P.	5	
Lakeside National Bank Rockwall, Texas Stock Banking	Lakeside National Bank Rockwall, Texas - CD and Cash Accounts	Lakeside Bancshares, Inc. Rockwall, Texas - Stock Banking	50% Interest 4 Acres 1500 Sunset Hill, Rockwall, Texas (adjacent to residence)	50% Interest 152 Acres Hunt County, Texas Farm	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 Schadule III requirements, please refer to the instruction booklet.	Exclude: Your parsonal residence, including second homes and vacation homes (unique there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or troome derived from, a federal retrement program, including the Thritt Savings Plan.	For rental or other real property held for Investment, provide a complete address or a description, e.g., "rental property," and a city and state. 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 location in Block A.	Provide complete names of stocks and mutuel fixeds (do not use ticker symbols.) 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 reporting thresholds.	Asset and/or income Source ldentify (a) each asset held for investment or production of knoome with a fair market value exceeding \$1,000 at the end of the reporting pariod, and (b) any other reportable asset or sources of knoome which generated more than \$200 in "unservised" knooms during the year.	BLOCK A	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$50,001 - \$100,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$100,001 - \$250,000	\$100,001 - \$250,000		held solely by your spouse or dependent child.	the reporting year and is included only because it generated knome, the value should be "None." *This column is for assets	mathod other than fair market value, please specify the method used. If an asset was sold during	Year-End Value of Asset Indicate value of asset at close of reporting year. If you see a valuation	ВLОСК В	Name Raiph M. Hall
None	INTEREST	None	None	None/None				(such as 401(k) plans or RAAs), you may check the "None" column. Dividends, Inferest, and capital gains, even if reinvested, must be disclosed	Type of income Check all columns that apply. For refirement accounts that do not allow you to choose specific investments or that generate tax deferred income	BLOCK C	Hail
NONE	\$201 - \$1,000	NONE	NONE	NONE			or generated. * This column is for income generated by assets held solely by your spouse or dependent child.	the appropriets box below. Dividencie, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned	Amount of Income 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	BLOCKD	
T								reporting year,	Transaction indicate if sase? had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in	BLOCK E	Page 3 of 8

Page 4 of 8

ms by you, your spou		
ns by you, your spouse, or dependent child during the reporting period of any security or real property held for	Name Ralph M. Hall	
al property held for	Page 5 of 4	

Report and investment between y is sold, pit Capital Ga	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions — between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Capital Gains — If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	ase, or dependent child a capital loss. Provide a ale of your personal res as of \$200, check the "	during the re a trief descri idence, unles capital gains'	e reporting period of any security or real property held for scription of any exchange transaction. Exclude transaction releas it generates rental income. If only a portion of an astins" box and disclose this income on Schedule III.	recurity or rea transaction. I ncome. If only income on S	al property held for Exclude transactions a portion of an asset chedule III.
N₀. 9 % ,	Asset	Type of Transaction	Capital Gain in Excess of \$2007	Date	Amount	Amount of Transaction
	l akeside National Bank Rockwall Texas	Φ	N/A	03-15-12 and	\$15,001 - \$50,000	\$50,000

Page 6 of 8

No. 9649 for liabilities held solely by your spouse or dependent child.

No. SP,

DC,

Creditor 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 conved during the year. Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: 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 sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. "This column is Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; Rockwall, Texas North and East Trading Company Lakeside National Bank Rockwalt, Texas 2011 January Various Date Liability Incurred Name Ralph M. Hall Purposes Advances for Business CD Secured Type of Liability \$100,001 - \$250,000 \$15,001 - \$50,000 Amount of Liability

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SCHEDOLE VIII - POSITIONS	Name Raiph M. Hall Page 7 of 8
Report all posttlore, compensated or uncompensate representative, employee, or consultant of any corpustional or other institution other than the United incorary nature; and positions listed on Schedule is	Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule i.
Position	Name of Organization
President & Director (unpaid)	Lakeside Bancshares, Inc. Rockwall, Texas
Chairman & Director (unpaid)	Lakeside National Bank Rockwall, Texas
Chairman & Director (unpaid)	North & East Trading Company Rockwall, Texas
Chairman & Director (unpaid)	Linrock, Inc. Rockwall, Texas

964	9	P. 10_	_
Continuous	Date	Identify the date, government serv employee welfare	SCHEDULE
Continuous Myself and State of Te	Partie	identify the date, parties to, and general terms of government service; continuation or deternal of employee welfare or benefit plan maintained by	SCHEDULE IX - AGREEMENTS

No.

Pension for service in state legislature.	Care Nivself and State of Texas	Ontinuous
Tarme of Agreement	Dartine To	Data
	ployee welfare or benefit plan mainfalned by a former employer.	iployee welfare
vernment service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an	ice; continuation or deterral of payments by a former or cui	vernment servic
entify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a teave of absence during the period of	parties to, and general terms of any agreement or arranger	ntify the date, p

Name Ralph M. Hall

Page 8 of 8