OCT 24 2012

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**EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION** PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS In all sections, please type or print clearly in blue or black ink. III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III. It. 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? If yes, complete and attach Schedule II. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics **EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child **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? Period covered: January 1, FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES Name: Status Filer NARK Each question in this part must be answered and the appropriate schedule attached for each "Yes" response Candidate for the House of Representatives New officer or POCAN Employing Office: ٢ χ<sub>88</sub> Yes Yes M ষ Daytime Telephone 8 <u>8</u> 8 Date of Election: For use by candidates and new employees 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. VI. 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. V. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule V. 2 7 ł **ANSWER EACH OF THESE** Amendment Check if against any individual more than 30 days late \$200 penalty shall be assessed U.S. HOUSE OF REPRESENTATIVES \_\_GISTATIVE RESOURCE CLIMITE 2012 OCT 26 PM 12: 11 QUESTIONS (Office Use Only) Yes Yes Yes Yes Yes ¥ O 8 X <u>8</u> ⊠ N N <u>8</u> 8 <u>₹</u> files

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name MARIC POCAN

> Page 12 잋

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 benefits received under the Social Security Act.

		Amount	unt
Source (include date of receipt for honoraria)	lype	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Budged Signit Specialtian	Schon	37,050	<b>352,619</b>
State of wiscours	Salw	37,457	53912
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* Private	BUDGE	2125	STAT	Ame		DC, Examples:	9	that is not publicly trad ross, the nature of its creation in Block A.  Exclude: Your person thomes and vacation h browned and vacation h income during the repoing \$5,000 or less in accounts; and any firderived from, a federather Thrift Savings Plan.  If you so choose, you income source is that cent child (DC) or is joint the optional column on the optional column	an ownership	account and its value at the e For rental or other real pro- provide a complete address.	Provide complete names of (do not use ticker symbols). (do not use ticker symbols). For all IRAs and other retire loans) that are self-directed have the power, even if not fic investments), provide to the account that exceeding the account that exceeding the power of the power	tify (a) each a come with a fe end of the rable asset of the rable ass	Asset ar
Refrigate film in lunderum	BUDGET SIDNITS (ECLAPTICS), *	2125-23 12 4 1 (wwhy 1)	STATE OF MI PENSION	AMERICA PUZD	1st Bank of Paducah, KY accounts	Simon & Schuster	SP Mega Corp. Stock	ed, state the name of the busi- activities, and its geographic al residence, including second ornes (unless there was rental ring period); any deposits total- personal checking or savings ancial interest in, or income i retirement program, including may indicate that an asset or flyour spouse (SP) or depend- your spouse (SP) or depend- ty held with your spouse (JT), in the far left.	For an ownership interest in a privately-held business	and of the reporting period.  perty held for investment.	Provide complete names of stocks and mutual funds (do not use ticker symbols).  For all IRAs and other retirement plans (such as 401(k) Plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the page of the institution holding the	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 the end of the reporting period, and (b) any other than \$200 in success of income which generated more than \$200 in "unearnest" income which the bear	Asset and/or income Source
				-	H			None \$1 \$1,000		A B	method used. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value blease specify the	
				×		Pul		\$1,001 – \$15,000		၁	ass me, me,	atio ate	
	<u> </u>	ļ	×	ļ	┖	Indefinite	$\perp$	\$15,001 - \$50,000		0	use set v set v g ye saus the		<u>≨</u>
	1		<del>                                     </del>	ļ	<del>  .</del>	õ	×	\$50,001 - \$100,000		ш	was was se if	e de la	6
	<b>&gt;</b>	×	+		×			\$100,001 - \$250,000 \$250,001 - \$500,000		F G	s sol and ge	er and	Value of Asset
		1	<del> </del>		╂╴	-	-	\$500,001 – \$1,000,000		I	ld d is i	sse fyo the	As
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								\$25,000,001 - \$50,000,000		7	<del>م</del> 9	± ± ± Se	
					L			Over \$50,000,000		_			
	X	×	×		┡		×	NONE			es ass	글등로운	
			-	×	×	$\vdash$	-	DIVIDENDS	_		deferred income (s plans or IRAs), you plans or IRAs), you rear a capitr interest, and capitr if reinvested, must as income. Check asset generated no the reporting period.	Check retiremore allow you ments	
			+	<del> </del>	╀		$\dashv$	RENT			vest, a		₹
		<del>                                     </del>	<del>                                     </del>		H		$\dashv$	CAPITAL GAINS			RAS)	all columns ant accour or to choos	ኧ ͺ
					┢			EXCEPTED/BLIND TRUST			Dhe cap		e of Inc
			" "	·	1			TAX-DEFERRED		•	O. State	s th ge ge	
						Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	ome	)	deferred income (such as 401(k) plans or IRAs), you may check the "lax-Deferred" column. <b>Dividends</b> , interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-	Type of Income
	λ	λ	$\lambda$					None	_				
								\$1 – \$200	=	1			
			1	×	<b>!</b> —	<u> </u>		\$201 – \$1,000	=	ြဂ			
	<u> </u>	<u> </u>	-		L	V	×	\$1,001 - \$2,500 \$2,501 - \$5,000	₹ <	Current Year	app and inc	For Nor	
					×	×	$\vdash$	\$2,501 — \$5,000 \$5,001 — \$15,000	<	1 3	the category or income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as 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	
			+	<del> </del>	1		$\vdash$	\$15,001 - \$50,000	VI VII VIII	1 🕏	ate(	assets rred" ir le" colui	
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								\$1,000,001 - \$5,000,000	×	]	be be red	for which you checked "Tax- Block C, you may check the nn. For all other assets, indicate	Amount of Income
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$\perp$	<u> </u>	<u> </u>	ļ		1			\$1 – \$200	=	4	era Cracio	. 호 = 2	, i
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+	<del> </del> -	<del> </del>	<del> </del>		×	×		\$1,001 - \$2,500 \$2,501 - \$5,000	<u>&lt;</u>	1 g	. "Xishined	ets, cr	
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			<u> </u>					\$1,000,001 - \$5,000,000	×	]			
					Г	:		Over \$5,000,000	×	1	I		

## SCHEDULE III — LIABILITIES

Name MARK POCAN Page 4 of 4

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

			SP, DC, JT	
\(\text{\chi}\) \(\text{\chi}\)	M+ I BAUL (BAO HADAIS),	Example: First Bank of Wilmington, DE	Creditor	
	ousoins	May 1998	Date Liability Incurred mo/year	
	Bushall Loan	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
			\$10,001— \$15,000	
	X	L	\$15,001— \$50,000 <b>D</b>	
	-	  ×	\$100,000 O	A
		$\vdash$	\$250,000 <b>S</b> \$250,001— <b>m</b>	Amount of Liability
	<del>                                     </del>	t	\$500,001— \$1,000,000	of Lia
			\$1,000,001— \$5,000,000	bilitv
		L	\$5,000,001— <b>±</b>	
		L	\$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-

and positions solely of an honorary nature 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 all floridiary flatere.	AUIC,
Position	Name of Organization