1							
₹	Yes	pendent chil	bilities of a spouse or dependent child Committee on Ethics.	"unearned" income, transactions, or liabilities of a spouse or unless you have first consulted with the Committee on Ethics	arned" incom ss you have f	er assets, "une wer "yes" unles	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabil because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the (
₹	es 🗆	ot be	excepted trusts" need no lent child?	ics and certain other "or spouse, or a depend	nittee on Ethi ting you, you	d by the Comn a trust benefi	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?
Ø	E QUESTION)F THESI	NSWER EACH OF THESE QUESTIONS	RMATION — AN	T INFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	s" response.	each "Yes	edule attached for each "Yes" response.	appropriate sched	and the	e answered and the	Each question in this part must be
S N	Yes	\$5,000 from	ompensation of more than \$5,000 from two prior years?	VI. Did you receive con a single source in the the fif yes, complete and a	No	Yes 🔀	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.
S ⊠	Yes	angement	reportable agreement or arrangement attach Schedule V.	V. Did you have any rewith an outside entity? If yes, complete and a	<u>§</u>	ğ X	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? If yes, complete and attach Schedule II.
N _o	Yes	efore the date ir two years?	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.	IV. Did you hold any r of filing in the current If yes, complete and	8	Yes 🔀	I. 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.
			S .	EACH OF THESE QUESTIONS	OF THE	ER EACH	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWER
who files	A \$200 penany snall be assessed against any individual who files more than 30 days late.	against more tha		Election: March 20, 2012	Electic	Office:	Status New officer or Employing Office:
TATIVES	U.S. HOUSE OF REPRESENTATIVES	U.S. H	Check	100 mary			Candidate for the
CENTER: 32	2012 FEB - 1 AN II: 32	LEGIS 201:		Daytime Telephone:	Daytime		Name: John Norman TREE
1 of 6	WAN 23 55.7		RM B s and new employees	FORN For use by candidates		VIIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2011 - Σαννωγ 21, 2

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

John Norman TREE

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Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Exclude: Military pay (such as National Guard of Reserve pay), lederal retilement programs, and benefits received direct the Social Section, Act.	rement programs, and benenis re	Ceived Under the Social	Security Act.
Source (include date of receipt for honoraria)	Туре	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
Caymen Ventures, INC, Buffalo Grove, 11	Salary	\$10,500	\$169,000
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Conjunes Village in a (Scarp)	529	Des Uppointe 529 Plan and	Die Ulpamise 529 Plan Grad	Dy Upromise 529 Plus Grad	Charle Boule Accounts	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, Mega Corp. Stock	ness, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits total-ing \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (CIC) or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business the publicly traded, state the name of the publicly traded is not publicly traded.	account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address.	Identify (a) each asset neld 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 asset or sources of income which generated more than \$200 in "unearned" income during the year. 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 name of the institution holding the	BLOCK A Asset and/or Income Source
*	><	*	*	*	*	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$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 - \$5,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000		A B C D E F G H - L K L	Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	BLOCK B Value of Asset
sudI	×	×	× '	X	×	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: e.g., Partnership Income or Farm I	Income)	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	BLOCK C Type of Income
	× ×	×	× ×	× × ×	× ×		×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$10,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Current Year Preceding Year	For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of 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.	BLOCK D Amount of Income

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Norman TREE

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								The Centres of John	Kellegg Stock			Asset and/or income Source	RI OOK A
									メ	None \$1 - \$1,000 \$1,001 - \$15,000	A B C		
			,					×		\$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000	D E F G	Value of Asset	<u> </u>
										\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000		Asset	Ö
								×	×	Over \$50,000,000 NONE DIVIDENDS	· _		
										RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST		Type of Income	<u>5</u>
						-				Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	e	Income	Ŕ
								×		None -			
						 <u></u>			X .	\$1 - \$200 =			
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SCHEDULE III — LIABILITIES

Name John Norman TREE

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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. owed 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 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 sib-

	58		77		SP, DC, JT
	USAA	Citibank	American Express	Example: First Bank of Wilmington, DE	Creditor
	Dec 2611	Du 201	Dec 2011	May 1998	Date Liability Incurred mo/year
	Greatit Cord	Creatit Cord	Gedit Cord	Mortgage on 123 Main Street, Dover, DE	Type of Liability
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					\$25,000,001— \$50,000,000
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SCHEDULE IV — POSITIONS

cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, 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-

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 nonorary nature.	nature.
Position	Name of Organization
	M/A

Name John Norman TREE

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SCHEDULE V — AGREEMENTS

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
	A/A	

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.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
Winona Capital, Chicago IL	Consulting Services
Hired Gun Advises, Chicago IL	Consulting Services
Mizkan, Moout Prospect 1c	Consulting Services
Campbell Sovo Camber NJ	CONSULTING SOLVICES
Lassalle Adams Capital Partners, Chicay, 12	(DNSJANG Services
Amusin Enterburned Inc., Oak Brook, 16	