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FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, といと・ ハッ パラリン・ トラリン・ For use by candidates and new employees		EGISLATIVE RESOURCE CENT 2013 OCT 30 PM 1:51	EX .
Name: としょい H. Jenksいら Daytime Telephone:	U.S. HOUSE OF REPRESENTATIVES	THE CLERK EPRESENTATIV	ES
	(Office U	Office Use Only)	
Filler Candidate for the State: WY Date of 5/13/14 Check if House of Representatives District: 93 Election: 5/13/14 Amendment		•	sed
Employing Office:	more than 30 days late.	ys late.	1100
in all sections, please type or print clearly in blue or black ink.			
PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS			
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? Yes No No No Prive you hold any reportable positions on or before the date of filling in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	on or before the date he prior two years? Yes	No No	
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 No V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	t or arrangement Yes	8	
III. Did you, your spouse, or a dependent child have any reportable ilability (more than \$10,000) during the reporting period? Yes VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? A single source in the two prior years? If yes, complete and attach Schedule VI.	than \$5,000 from Yes		₹
Each question in this part must be answered and the appropriate schedule attache	le attached for each "Yes" response.	Onse.	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EA	WER EACH OF THESE QUESTIONS	STIONS	
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?	ed not be Yes		₹
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? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	or dependent child Yes		₹

SCHEDULE I— EARNED INCOME (INCLUDING HONORARIA)

TEVAD JEDICENS

Page 2 of Le

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 use the source to 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 benef	ement programs, and benefits re	its received under the Social Security Act.	ecurity Act.
 Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
	Salav	\$6.300	\$28,450
 XYZ Corporation, Houston, IX	Director's Fee	\$400	\$3,200
 Examples: Thate Association Chicago II (Rec'd December 2)	Honorarium	0	\$1,000
 Harris County, Texas Public Schools	Spouse Salary	NA	NA
 West Viveriain State Market Asso Chilar Co	Sedury	136 144 -	141 249.00
 المالية المالية	School	21300	23,530.36
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General Electricas	City Holding to stock	(itigroup Inc stack	Brunk of Ame ice st	Allstate Cuip Stuck	Morgan Stanley Bruk		Examples:	SP Mega Corp. Stock	Exclude: Your personal residence, including secont homes and vacation homes (unless there was rental 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 refrement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or frome source is that of your spouse (SP) or dependent child (DC) or is jointly hald 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.	ocation in Block A.	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 accordance.	plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	Provide complete names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k)	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 asset or sources of knoome which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source
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					<u> </u>	一			\$1 - \$1,000		0	be "None." "This column is for assets solely held by your spouse or dependent child.	If an asset was sold during the report- ing year and is included only because it generated income, the value should	Indicate value of asset at close of reporting year. If you use a valuation method offier than fair market value, please specify the method used.	
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SCHEDULE II - ASSETS AND "UNEARNED" INCOME

Asset and/or income Source Pyeor income Pyeor	SCHEDULE II — ASSETS AN Continuation Sheet (if needed)	ed)		Name EUAN JENKENS
None	Asset and/or Income Source	Value of Asset	Type of Income	Amount
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SCHEDULE II — ASSETS ANI Continuation Sheet (if needed)	ASSETS AND "UNEARNED" INCOME		Name Eury Jenkins	ະພຽ Page
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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Continuation Sheet (if needed)

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

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SCHEDULE III - LIABILITIES

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

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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 off-

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

 Position	Name of Organization
 Director	Tri Chule have Council Bony Scouts of America Non-Outit Hundryton W
 Office. Director	Focks Foundation I'm Now-Drafit Hundrator wi
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 011.4	West Virginia Medical Foundation I'm Don Profit Charles for we
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Use additional sheets if more space is required.

SCHEDULE III - LIABILITIES

Name Evan Jenkins

Page 1 of 10

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

					JT DC.	
				Example: First Bank of Wilmington, DE	Creditor	
				May 1998	Date Liability Incurred mo/year	
				Mortgage on 123 Main Street, Dover, DE	Type of Liability	
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					Spouse/DC Liability over ス \$1,000,000	

SCHEDULE IV - POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, 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 honorary nature.

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Position	Name of Organization
Director 10ftime	Lily! Place Inc Non- Drofit Nontinglan
Direct	ا ج
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SCHEDULE V — AGREEMENTS

Name Eura Jewkin Page 12 of 12

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Brillia CI Vilianii	Parties To	Date
nt; a	identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employme service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or effit plan maintained by a former employer.	identify the da service; contin efit plan maint

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.

Cook in the control of the control o	
Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services