E S	Yes	ependent child	lities of a spouse or de Committee on Ethics.	"unearned" income, transactions, or liabili unless you have first consulted with the C	arned" income is you have fire	ort any other assets, "unea Do not answer "yes" unles	m this report any xemption? Do no	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.	EXEMPTION—Have you en because they meet all three
E S	Yes 🔲	not be	cepted trusts" need n	s and certain other "ex spouse, or a depender	nittee on Ethics ing you, your s	roved by the Comm	Blind Trusts" app report details of	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?	TRUSTS—Det
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	esponse.	each "Yes" r	ule attached for	ppropriate sched	and the ap	st be answered	this part mu	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	
Z S	Yes 🔲	\$5,000 from	ompensation of more than two prior years? attach Schedule VI.	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.	N N	Yes	nild have any repor reporting period?	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.	III. Did you, your able liability (mor If yes, complete
8	T T	rrangement	eportable agreement or ar attach Schedule V.	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	Š	od? Yes	ild receive "unearn period or hold any the end of the peri	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.	II. Did you, your income of more t reportable asset if yes, complete
<u>8</u>	Z Z	before the date or two years?	vortable positions on or the price tach Schedule IV.	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.	No	or Yes 🔟	ome (e.g., salaries e reporting period?	I. Did you or your spouse have "earned" income (e.g., salaries fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	I. Did you or you fees) of \$200 or r
	•			E QUESTIONS	EACH OF THESE	/ER		PRELIMINARY INFORMATION — ANSW	PRELIMIN/
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ប៊	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE OF I		Telephone:	Daytime '	A. PAK00TAS Daytime Telephone:	A. PA	JOSEPH	Name:
Page 1 of 7 NTER 25	Page LEGISLATIVE RESOURCE CENTER 2014 MAY 21 PM 12: 25	LEGISLATIVE!	M B s and new employees	FORM B For use by candidates and new employees	- - 	PRESENTATIVES EMENT April 30, 2014		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - April 30, 20	FINANCIAL Period cover

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name JOSEPH A. PAKOOTAS

Page 2 of 7

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	exceeding \$1,000. See examples below.	d əl	₹
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		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	nployment by the U.S. Government) totalling \$200 or
			,

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.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	nent programs, and benefits rea	ceived under the Social S	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
Comics (monde date of receipt to individual)	1700	Current Year to Filing	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	NA
Colville Tribal Federal Corporation, Coulee Dam, WA	Salary	\$61,792	\$150,965
Inchelium School District No. 70, Inchelium, WA	Spouse Salary	Ô	\$2,656
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JT Inchelium Short Stop LLC	sp Prudential Financial	Rudential Financial	IT IP Morgan Clearing Corp.	IT IP morgan Chase	JT American West Bank		DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	incomes and vacculor norms (unless there was remained 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 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 (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.	Exclude: Your personal residence, including second	y-held business me of the busi- its geographic	For rental or other real property held for investment, provide a complete address or a description, e.g., the mental property," and the city and state.	ment plans (such as 401(k) or each asset held in the porting 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 asset or sources of income which generated more than \$200 in "unearned" income during the year.	BLOCK A Asset and/or Income Source
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Partnershy	×	×	×	><	×	×	Royatties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	come)		during the reporting period.	interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column. Dividends ,	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)	BLOCK C Type of Income
X	X	×	X	><	×		X	X	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Cver \$5,000,000 \$201 - \$1,000 \$1 - \$2,500 \$201 - \$1,000 \$1,001 - \$2,500 \$201 - \$1,000 \$1,001 - \$2,500 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$5,000,000 \$50,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$200,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$200,0000 \$200,0000 \$200,0000 \$200,0000 \$200,0000		Current Year Preceding Year		* This column is for income derived from assets solely held by your spouse or dependent child.	income. Check "Non	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 the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as	BLOCK D Amount of Income

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOSEPH A. PAKOOTAS

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

Name JOSEPH A. PAKOOTAS

Page 5 of 1

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SCHEDULE III — LIABILITIES

Name JOSEPH A. PAKOOTAS

Page 10 of 1

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 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.

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					SP, DC, JT
				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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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 all floriolary flature.	attire.
Position	Name of Organization
PARTNER	INCHELIUM SHORT-STOP LLC

SCHEDULE V - AGREEMENTS

Name JOSEPH A. PAKOOTAS

Page 7 of 7

		2014	Date	Identify the date service; continui efit plan maintai
	Corporation	Myself & Colville Tribal Federal	Parties To	Identify the data, parties to, and general terms of any agreement or arrangement with a service; continuation or deferral of payments by a former or current employer other the effit plan maintained by a former employer.
	campaign process	Leave of Absence during my	Terms of Agreement	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.

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

GPO: 2013

78-995 (mac)