S C	§	or dependent child hics.		transactions, or liability on suited with the C	arned income, as you have fin	prassets, 'une wer 'yes' unter	en this report any officemption? Do not ans	EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spous because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on E	EXEM becau
№ Д	™	ot be	xcepted trusts" need n	s and certain other "as spouse, or a depende	ing you, your t	d by the Comm a trust benefit	Blind Trusts" approve	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "axcepted trusts" need not be declosed. Heve you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?	TRUS
S	QUESTION	OF THESE (SWER EACH (NATION — AN	TINFORM	OR TRUS	DEPENDENT,	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	EXCL
	esponse.	for each "Yes" response.		ppropriate schec	I and the a	e answered	this part must bu	Each question in this part must be answered and the appropriate schedule attached	
*	Y 26 🔯	than \$5,000 from	\$ \$	Vt. Did you receive compensation of more a single source in the text prior years? If yes, complete and attach Schedule V	1	¥ 8	hild have any report- reporting period?	III. Did you, your spouse, or a dependent child have any reportable lability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	W yes and
₹	NE TO	nt or arrangement	portable agreement or autach Schedule V.	V. Did you have any reportable agreement with an outside entity? If yes, complete and attach Schedule V.	8	₹	hid receive "unearned" period or hold any the end of the period?	II. Did you, your spouse, or a dependent child receive "unserned" 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 attech Suhedule II.	II. Did) Income If year, o
₽	¥	on or before the date the prior hap years?		N. Did you hald any reportable positions of liting in the current calendar year or in if yes, complete and attach Schedule !	₹ <u>S</u>	1	come (e.g., salaries or e reporting period?	 Did you or your spouse have "earned" income (e.g., saleries or fees) of \$200 or more from any source in the reporting period? If yes, eemplete and attach Safeatate I. 	2 () () () () () () () () () (
			"	E QUESTIONS	OF THES	ER EACH	Y in blue or black int.	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	PREL
who files	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 penany shall be against any individual more than 30 days late	Amendment	HILLI	Election	ing Office:	talives Dietrici 24 Employing Office:	House of Representatives New officer or employee	Filer
	(Office Use Only)	2	2			6			
*	_			Daytime Telephone:	Daytime		CHSCO	Name: John Koit CRISCO	Nan
ENTATIVES	OFFICE OF REPRESENTATIVES	1.S. HOUS				1010	11 - 1111/11/10	Period covered: January 1	Pend
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CE CENTER	LEGISLATIVE RESOURCE CENTER	TEGISTA	i						

SCHEDULE I -- EARNED INCOME (INCLUDING HONORARIA)

Name John Ko; A ORIGEO

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				. //\	$V = V_0$	Harris County, Texas Public Schools	XYZ Trade Association, Chicago, IL (Flec'd December 2)	Examples: First Bank & Trust, Houston, TX	XYZ Corporation, Houston, TX		Source (include date of receipt for honorade)	Exclude: Military pay (such as National Guard or Reserve pay), federal refirement programs, and benefits received	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	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	
						Spouse Salary	Honorarium	Director's Fee	Spilary	.776	Type	rement programs, and benefits re	amount of any honoraria; list only	than the filer's current employme	-
						*	•	\$68	\$6,300	Current Year to Filling	Amount	sceived under the Social Security Act.	y the source for other spo	ent by the U.S. Governme	
						*	\$1,000	\$3,200	\$28,450	Preceding Year		Security Act.	use earned income	nt) totalling \$200 or	

SCHEDULE 11 — ASSETS AND "UNEARNED" INCOME Confinuation Street (if resided) Name John Keil Cisco

]	Ì						\dashv				
	BLOCK A		BILO	BLOCK B			BLOCK C	ñ				•	BLOCK D
	Asset and/or income Source		Value o	Value of Asset		<u>۔</u>	Type of Income	come				<u> </u>	Amount of Income
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Asset and/or income Source	BLOCK A	CHEDULE II — ASSETS AND "UNEARNED" INCOME
Value of Asset	BLOCK B	"UNEARNED" INCOME
Type of Income	BLOCK C	
Amount of Income	BLOCK D	Name John Keik Chisco Page of

thirmby (a) each sees these thresh the frincement or production fridictite value of all sections with a set concessing \$1.000 at reporting year. (If you use a valuation of at the control of the reporting peace, and by any other machine control control or the value of the reporting peace, and by any other machine control control control control or reporting peace, and by any other machine control			Asset and/or income Source
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SCHEDULE III - LIABILITIES

Name John Keith Crisco

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

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SCHEDULE IV - POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior <u>years</u> as an offi-car, director, trustee, partner, proprietor, representative, employee, or consultant <u>of any company,</u> firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any aducational or other institution other than the United States.

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 solery or an individually nature.	escure.
Position	Name of Organization
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SCHEDULE V - AGREEMENTS

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Date	Parties To	Terms of Agreement
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SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business stifliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, ifirm, 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
ALC NARROW PAPACE	Cosporte BOAR Mouber - Contract Scarton