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UNITED STATES HOUSE OF REPRESENTATIVES

## PRELIMINARY INFORMATION EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS If yes, complete and attach Schedule V. or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? 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. **EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because excluded from this report details of such a trust benefiting you, your 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 IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering? V. 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 IV. IV. Did you, your spouse, or a dependent child purchase, self If yes, complete and attach Schedule III. 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? Name: they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the **CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT** Did you, your spouse, or a dependent child receive "unearned" If yes, complete and attach Schedule II. reporting period? Report Type Status Filer LOSERY HUR Member of the U.S. House of Representatives Innual (May 15, 2013) District: 511 State: \_ **ANSWER EACH OF THESE QUESTIONS** Y PL NIA Amendment Yes X Yes Yes Yes Yes X Daytime Telephone <u>Z</u> ĕ X 8 8 ĕ X Officer or Employee an outside entity? If yes, complete and attach Schedule IX. reportable travel or reimbursements for travel in the reporting of filing in the current calendar year? If yes, complete and attach Schedule VIII period (worth more than \$350 from one source)? VII. Did you, your spouse, or a dependent child receive any Did you have any reportable agreement or arrangement with VIII. Did you hold any reportable positions on or before the date If yes, complete and attach Schedule VII. If yes, complete and attach Schedule VI. than \$350 and not otherwise exempt) Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more For use by Members, officers, and employees appropriate schedule attached for each "Yes" response **Employing Office** Each question in this part must be answered and the Termination fermination Date: S. HOUSE OF RECEIPED DEMONY EGISLATIVE RESOURCE CENTER MIC 2013 MAY 15 PM 1: 12 HAND DELIVERED against anyone who files more than A \$200 penalty shall be assessed 30 days late. Yes Yes Yes Yes Yes Yes Yes ₹ |X § ⊠ <u>8</u> × <u>8</u> × <u>₹</u> × § X 8

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## SCHEDULE I -- 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 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.

	A	
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 NA
Functioned Movement Systems, Inc. Chatham, Vivainia	Spouse Salamy	**
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Calling Bond Florid 529		American Funds IRA The butestment Co of America - A	American Express Somings Account	INCITIZENS Checking Account	BBAT Checking Account	1st Bank of Paducah, KY Accounts	, ,	SP Mega Corp. Stock	ness, the nature of its activities, and its geographic location in Block A. <b>Exclude:</b> Your personal residence, including second homes and vacation homes ( <i>unless</i> there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving 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 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 busi-	For rental or other real property held for investment, pro- vide a complete address or a description, e.g., "rental property," and a city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting 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.	Asset and/or Income Source	BLOCK A	SCHEDULE III — ASSETS AND
							_		None	₽	1	* This column is for assets spouse or dependent child.	in an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	year. If you use a valuation method other than fair market value, please specify the method used.	:		1
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							Royalties		Other Type of Income		7	be disclosed as "None" if the asset income during the	check the "Tax- Dividends, Inter- ains, even if rein-	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	ፙ		11
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			<u> </u>			T		-1	\$1,000,001 - \$5,000,000	×	7	sets held solely by your spouse	and capital gains, even if reinvested, must be disclosed as income. Check "None" if	For assets for which you checked "lax- 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. <b>Dividends</b> , <b>Interest</b> ,	ā		H
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SCHEDULE III — ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

Name Robert-Huri

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## SCHEDULE V— LIABILITIES

Name ROSCAT HURY

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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 during the year. Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal close of the preceding calendar year exceeded \$10,000. \*This column is for liabilities held solely by your spouse or dependent child. 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 residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you

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•			1st Citizens Bank	B8\$T	Example: First Bank of Wilmington, DE	Creditor				
			7/08	1)/1	May 1998	Liability Incurred Mo/Year	Date			
			Business Equity Line - 104. How & Ald	Montgage on 246 N. Moin SI Chatha	Mortgage on 123 Main St., Dover, DE	Type of Liability				
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## SCHEDULE VI -- GIFTS WA

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

**Note:** The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

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		Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
		Silver Platter (determination on personal friendship received from Committee on Ethics)	Description	
		\$375	Value	