POSTMARK ILLEGIBLE

	 		Committee on Ethics.	st consulted with the	ss you have fir	nswer "yes" unle	et all three tests for exemption? Do not a	because they me
N .	٧ ₉₈	ependent child	ilities of a spouse or de	, transactions, or liabi	arned" income	ther assets, "une	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child	EXEMPTION-
№	Yes 🔲	ot be	ent child?	s and certain other "e spouse, or a depende	nittee on Ethics ting you, your	ved by the Comn ich 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?	TRUSTS—Detai disclosed. Have
i <u>v</u>	QUESTION	OF THESE (— ANSWER EACH OF THESE QUESTIONS	MATION — AN	TINFORM	r, or trus	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION
	esponse.	each "Yes" re	dule attached for each "Yes" response.	ppropriate sched	and the a	be answered	Each question in this part must be answered and the appropriate sched	
N _o	Yes X	\$5,000 from	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.	VI. Did you receive cor a single source in the the thick that the thick the thick the thick the thick the thick	8	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.	III. Did you, your s able liability (more If yes, complete a
₹	Yes	rangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V.	8	Yes	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 spincome of more that reportable asset we ff yes, complete a
8	Yes 🔀	before the date or two years?	Did you hold any reportable positions on or before the date filing in the current calendar year or in the prior two years? res, complete and attach Schedule IV.	IV. Did you hold any reportable positions o of filing in the current calendar year or in the figure of the second	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.	I. Did you or your tees) of \$200 or mo
			0 ,	ANSWER EACH OF THESE QUESTIONS	OF THESI	ER EACH	PRELIMINARY INFORMATION — ANSW	PRELIMINA
							en time or print clearly in blue or black ink	in all coetions pla
assessed who files		A <i>\$200 penalty</i> shall be against any individual more than 30 days late.	Check if Amendment	ZOYY	Date of Election:	Je Je	Candidate for the State:	Filer
	(Office Use Only)	\mathcal{C}_{\circ}						
ATIVES	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE		Daytime Telephone:	Daytime		Sharu Tacherra	Name:
Page 1 of. 4 CENTER	Page 1: LEGISLATIVE RESOURCE CENTER 2014 MAY 19 PM 1: 14	LEGISLATIV 20 14 MAY	M B and new employees	FORM B For use by candidates and new employees		ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2014 - 1/6, 4, 2014	UNITED STA

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

0	Name Johnna Tacherna
	Page 2 of 4

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 Heserve pay), rederal retirement programs, and benefits received under the Social Security Act.	ement programs, and benefits re	Sceived under the Social Sec	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
Fyamples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Morning Stor Dain Inc.	Salar	\$9,280	\$21,00
Morning Star Dairy Inc.	Samse Salan	#280	#4.500
IT Castons	Tomass son. C	100 603	\$ 125,254
			,
		-	

41:62	Frem Police Departured	Municipality Star Daing	Morning She Dainy	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP Mega Corp. Stock	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 depen- dent 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 homes and vacation homes (unless there was rental	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 geographic location in Block A.	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.	(do not use ticker symbols). 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.	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. Provide complete names of stocks and mutual funds	Asset and/or Income Source	BLOCK A
*		*		×	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 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*		A B C D E F G H - J K L M	I his column is for assets solely held by your spouse or dependent child.	ing year and is included only because it generated income, the value should be "None."	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 report-	Value of Asset	BLOCK B
	×	Stak	19th Q	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	come		during the reporting period.	"lax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no 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	Type of Income	BLOCK C
	×		× ×		×	×	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 Spouse/DC Income over \$1,000,000* None \$1 - \$200 \$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 \$50,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$50,000 \$100,001 - \$1,000,000 \$1,000,001 - \$1,000,000 Spouse/DC Income over \$1,000,000*	= = = = = = = = = = = = = = = = = = =	Current Year Preceding Year		45 4	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 income. Check "None" if no income was earned or generated.	Amount of Income	BLOCK D

SCHEDULE III — LIABILITIES

Name Johnny Tacherra

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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 furnitively. 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. 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-

 	 		_	
				SP, DC, JT
		Bout of the West	Example: First Bank of Wilmington, DE	Creditor
		2005	May 1998	Date Liability Incurred mo/year
		2005 County live of Codit	Mortgage on 123 Main Street, Dover, DE	
		X		\$10,001 \$15,000
				\$15,001— \$50,000 w
				\$50,001— \$100,000
				\$100,001— \$250,000
			L	\$250,001 \$500,000
			L	\$500,000 m \$500,001— \$1,000,001— \$5,000,000 m \$5,000,000 m \$2,000,000
 				\$5,000,000
		<u> </u>		\$5,000,001—
				\$25,000,001
				\$25,000,001— \$50,000,000
				\$25,000,001— \$50,000,000

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 years as an officer, 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.

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

	0
California Farmers Union	Socialin
Cat Gov (Jeterans Memorial	Board of Directors
California Pairy Compaign	Board of Diacolous
Morning Su Dairy Inc.	Director
Name of Organization	Position