	es es	not be	t child? It child? It child? It child? It child?	Committee on Ethics and certain other "excending you, your spouse, or a dependent "unearned" income, transactions, or liability unless you have first consulted with the Co	nittee on Ethics ting you, your s arned" income, is you have firs	ed by the Comn h a trust benefi her assets, "une swer "yes" unler	Blind Trusts" approve report details of such this report any other xemption? Do not an	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? EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependence they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	TRUSTS—Didisclosed. Ha
<u>I</u>	QUESTION	OF THESE	- ANSWER EACH OF THESE QUESTIONS		TINFORM	OR TRUS	DEPENDENT	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSION
	response.	each "Yes"	ule attached for each "Yes" response		and the ap	e answered	this part must b	Each question in this part must be answered and the appropriate schedu	
₹	Yes 🔲	\$5,000 from	ນensation of more than ນ prior years? ech 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.	8 ⊠	Yes	ild have any report- 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, yo able llability (m If yes, comple
⊠	Yes □	rrangement	ortable agreement or a sch Schedule V.	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	§	es	lid receive "unearned" eriod or hold any the end of the period?	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, you income of more reportable asset if yes, complete
N _o	Yes 🔲	before the date or two years?	ortable positions on or andar year or in the princh 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.	N _S	Yes 🔀	ome (e.g., salaries or e 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 1. 	I. Did you or yo tees) of \$200 o If yes, complet
				E QUESTIONS	OF THESE	ANSWER EACH OF THESE	1 5	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSW	In all sections, PRELIMIN
		more than				Office:	Employing Office:	New officer or employee	Same
assessed	\$200 penaity shall be a	A \$200 per	Check if Amendment	Juny 3,2011	Date of Election:	CA	State: atives District:	Candidate for the House of Representatives	Filer
HATIVES	OSTICE OF REPRESENTATIVES (Office Use Only)	Snow str.		Telephone:	Daytime	Cras	Michael	Steven Michael Casbaytime Telephone:	Name:
Page 1 of ECENTER O: CO	Page 1 of LEGISLATIVE RESOURCE CENTER 2014 MAR 24 AN 10: CO	2014 M	B nd new employees	FORM (20/4 Fo		REPRESENTATEMENT	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - March 10	UNITED S FINANCIA Period cove

SCHEDULE I - EARNED INCOME (INCLUDING HONORARIA)

Name	
Page _	
of	

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.

	-	Amount	unt
Gorice (include date of fecelpt for nonotaria)	lype	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
1 .	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
Baker Manock Jensen Fresno CA	Salary	172,750	143.911
Fresho Unified School District	Sulary	13,933	9794
Fin Tree Learning	Saldry	7000	8344
	/		

SP LPL 403B	SP Vallic 40313	SU STRS	 Thiff Savings Pu	Charles Schumb		DC Examples: Simon & Schuster	SP, SP Mega Corp. Stock	nomes and vacation nomes (unless there was remains, 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 Thirlt 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	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.	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) surp other reportable asset or sources of income which generated more than \$200 in "unearmed" income during the year.	BLOCK A Asset and/or Income Source
X.	X	*	×	>	×	Indefinite	X	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 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000		A B C C D F F G H K K K K M	This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report- ing year and is included only because	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.	BLOCK B Value of Asset
×	×	×	×	X	×	Royaltos	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	ome)		during the reporting period.	Interest, and capital gains, even if reinvested, must be dis- closed 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 of that come (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 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000* None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$15,000 \$100,001 - \$5,000,000 \$100,001 - \$5,000,000 Spouse/DC Income over \$1,000,000 \$1,000,001 - \$5,000,000 Spouse/DC Income over \$1,000,000*		Current Year Preceding Year		* This column is for income derived from assets solely held by your spouse or dependent child.		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

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SCHEDULE II - A	- ASSETS AND "UNEARNED" INCOME	Ď	ے	Z	11	Į	3	[•	:														Z																	-	Page	ē ∣		9	l	4
8	BLOCK A		Ì	1	1		BLOCK B	Š	<u> </u>	i	1	ł]			- [<u> </u>	BLOCK C	웃	ဂ		_]]	11]]				11	a	BLOCK D	오니	וויי	. !!	- 11] [11		- 11	11	
Asset and/or	Asset and/or Income Source				*	Value of Asset	<u> </u>	및	.	80	-					_	록	ĕ	으	₹	8	Type of Income	_									>	¥	Ĕ	Amount of Income	≚	콩	ğ	₽								
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		None	\$1 - \$1,000	\$1,001 - \$15	\$15,001 - \$5	\$50,001 - \$1	\$100 <u>,001 -</u> \$	\$250,00 <u>1 -</u> \$	\$500,001 <u></u>	\$1,000,001 -	\$5,000,001 -	\$25,000,001	Over \$50,000	Spouse/DC A	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GA	EXCEPTED/	TAX-DEFERI		Other Type Partnership II	None	\$1 - \$200	\$201 - \$1,000	\$1,001 - \$2,50	\$2,501 - \$5,00	\$5,001 - \$15,0	\$15,001 - \$50	\$50,001 - \$10	\$100,001 - \$1	\$1,000,001 - \$	Over \$5,000,00	Spouse/DC Income	None	\$1 ~ \$200	\$201 - \$1,000	\$1,001 - \$2,50	\$2,501 - \$5,00	\$5,001 - \$15,0	\$15,001 - \$50	\$50,001 - \$10	\$100,001 - \$10	\$1,000,001 - \$1,		Over \$5,000,00
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SCHEDULE III - LIABILITIES

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Name	
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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 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 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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		Sallie Mar Phil PH	Sallie Mac Phil PA	Novy Federal Credit Unix VA	Example: First Bank of Wilmington, DE	Creditor	
	1	/1/2004	8/2007	8/2001	May 1998	Date Liability Incurred mo/year	
	•	Education luan	BUILDING Policetian Van	Credit Card	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
						\$10,001— \$15,000	
		<u> </u>	\times	×	L	\$15,001— \$50,000 a \$50,001—	
_		ļ			×	\$100,000 P \$100,001— \$250,000 P	
	<u> </u>	<u> </u>			-	\$250,001—	
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						\$1,000,001— \$5,000,000 ជ	
		<u> </u>			L	25,000,000	
					_	\$25,000,001— \$50,000,000 —	
				-	-	Spouse/DC	
					L_	Liability over ス \$1,000,000	L

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);

 	 	 	_
		Position	and positions solely of an honorary nature.
		Name of Organization	nature.

SCHEDULE V — AGREEMENTS

Name Page ____ of ___

Parties to			
	Date	Parties To	Terms of Agreement

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