HAND DELIVERED

e they meet all three Yes . No .	liabilities of a spouse or dependent child because they meet all three	samed" income, transactions, or with the Committee on Ethics.	EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
Have you excluded from Yes No No	need not be disclosed.	nmittee on Ethics and certain ot dent child?	TRUSTS Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" this report details of such a trust that benefits you, your spouse, or dependent child?
stion, please contact Yes . No .	porting period? If you answered "yes" to this question, please contact	tial Public Offering during the re	IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you the Committee on Ethics for further guidance.
HESE QUESTIONS	ATION - ANSWER EACH OF THESE	DEPENDENT, OR TRUST INFORMATION - ANSW	IPO, EXCLUSION OF SPOUSE, DEPENDENT,
CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	Ш	Yes No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
nation to charity in Yes No No	 Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period? 	Yes No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
otaling more than Yes No No Perorting period?	H. Did you, your spouse, or your dependent child receive any reportable travel or relimbursements for travel totaling more than \$350 in value from a single source during the reporting period?	Yes No	C. Did you or your spouse have "earned" income (CIII) salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
lild receive any Yes No	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single source during the reporting period?	Yes No	B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?
nrangement with an Yes No No	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes No	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?
		THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF
ate:	Termination Date:	Amendment	REPORT 2013 Annual (Due: May 15, 2014)
	Officer or Employing Office: Employee	01	FILER STATUS Member of or Candidate for State:
2015 APR 17 PM 1:48 V OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	none: <u>202-225-4372</u>	Daytime Telephone: 202-2	Name: Bobby L. Rush
Page 1 of 2 LEGISLATIVE RESOURCE CENTER	Form A For Use by Members, Officers, and Employees		UNITED STATES HOUSE OF REPRESENTATIVES 2013 FINANCIAL DISCLOSURE STATEMENT

	7					_	А	B B I	For retire retire required (4T)	#\$\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
									For benk and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts. For rental and other real property held for investment, provide a complete address or description, ILLL, rental property, and a city and state. 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. Exclude: Your personal residence, including second because and wacation homes (ILLIIIL) there was rental interest in, or income derived from, a federal interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. It you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or income source is that or your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optioned column on the far left.	
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					hrift Savings	ABC	Smor	Moga	ir cash accounts, total the firing accounts. If the total fitnercial institution where in interest bearing accounts are real property held for investe address or description and actly and state. Interest in a privately-held it by traded, state the name ture of its activities, in in Block A. In in Block A. In in Block A. In in Block A. In in House GUILIUI there we reporting period), and any reporting period), and any reporting period), and any privately-incided fund the ent. Fund, please check it is that of your spouse (DC), or joinely held with it column on the far left.	BLOCK A Asset and/or income Source (a) each asset held for investment or short of income and with a fair market value sing \$1,000 at the end of the reporting period,) any other reportable asset or source of s that generated more than \$200 in 'uneamed' s that generated more than \$200 in 'uneamed' s that generated more than \$200 in 'uneamed' to the generated more than \$200 in 'uneamed' to that generated more than \$200 in 'uneamed' that generated more than \$200 in 'uneamed' to the generated more than \$200 in 'uneamed' that generated more than \$200 in 'uneamed' to the generated more than \$200 in 'uneamed' than \$200 in 'uneamed' to the generated more than \$200 in 'uneamed' th
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							8	Ģ	\$15,001-60,000	& "UNEARNED INCOME" BLOCK B Value of Asset Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "None." Column M is for assets, held by your spouse or dependent child in which you have no interest.
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									EXEPTEDBLIND TRUST	Name: Dobby L BLOCK C Type of Income Check all columns that apply. Fo generals tax-deferred income (such the 529 accounts), you may check the oclumn. Dividends, interest, and over if reinvested, must be discloter assets held in toxable accounts if the asset generated no income duriperiod.
									TANCOM CONTROL	or the second
						Tours of	P) all		Other Type of Income	
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LJ					╚			S(part)	blank if there are that exceeded \$1,000.	BLOCK E Transaction Indicate if the asset has purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting period. if only a portion of an asset was sold, please indicate as follows: (S (part)).
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