<u>₹</u>	Yes	pendent child	abilities of a spouse or dependent child ne Committee on Ethics.	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or lial because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the	nearned" incom	ther assets, "ur nswer "yes" unl	EXEMPTION —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	excluded from the tests for exempted to the test for exempte	N Have you y meet all thre	EXEMPTIO because the
S S	Yes	ot be	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?	ics and certain other r spouse, or a deper	nmittee on Ethi	ved by the Con ich a trust bene	-Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain Have you excluded from this report details of such a trust benefiting you, your spouse, or a	ng "Qualified Blinded from this rep	Detaits regardir	TRUSTS—[disclosed. H
<u> </u>	QUESTION)F THESE	NSWER EACH OF THESE QUESTIONS	MATION — AI	ST INFOR	「, OR TRU	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	POUSE, DI	ION OF S	EXCLUSI
	response.	each "Yes"	schedule attached for each "Yes" response	and the appropriate sch		part must be answered	is part must	Each question in this	Each qu	
Š	Yes	\$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 on a single source in the fires, complete and	N _S	Yes 🔽	have any report- oorting 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.	our spouse, or a nore than \$10,00 ete and attach t	III. Did you, yo able liability (n If yes, compl e
<u>\$</u>	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 r with an outside entity If yes, complete and	No ✓	? 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.	the reporting peric than \$1,000 at the Schedule II.	our spouse, or a re than \$200 in the set worth more the ete and attach	II. Did you, yo income of mor reportable ass
8	Yes 🖸	efore the date or two years?	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.	IV. Did you hold any of filing in the current if yes, complete and	No O	Yes 🔽	e (e.g., salaries or porting 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. 	your spouse hav or more from an ete and attach !	I. Did you or y fees) of \$200 or the state of the state o
			NS .	EACH OF THESE QUESTIONS	OF THES	/ER	PRELIMINARY INFORMATION — ANSWER	PRELIMINARY INFORMATION	NARY INF	n all sections PRELIMII
	more man 30 days late.	more than				g Office:	Employing Office:	оуее	employee	:
assessed who files	— œ	A \$200 per against ar	Check if Amendment	m: 11.4.2014	Date of Election:	State: FLORADA District: 32		Candidate for the House of Representatives New officer or	Candi House	Filer Status
	(Office Use Only)	Ú.								
ITATIVE'S	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	OF U.S. HOU		Telephone	Daytime		43.66 (2.66	Name: ANDRGA LEIGH MCGEE	NORGA	Name: ∕
Page 1 of 4	VE RESOURCE	LEGISLATI	FORM B For use by candidates and new employees	FOR For use by candidates		NTATIVES	PRESE	UNITED STATES HOUSE OF REPRESE FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - MAY	STATES HI AL DISCLO	UNITED : FINANCI Period cov

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name ANDRUA LEIGH MCGEC

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), federal retirement programs, and benefits received under the Social Security Act.	rement programs, and benefits re	eceived under the Social S	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
	.) 60	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
DEBIANCIA REAL ESTATE	COMMISSION	08.245,41	2.640.60
Choolog with the Devic, LLC	FRIGIANIE PLANES	1,804.63	7,1060.00
TRAM YOURS, LLC	COMUNICA PLATES	£91.67	DA
NEW CAPS, LLC	FORELANCE PATES	NA	1156.00
City of Pompasso Brack	ARTIST PAIRS	7	1306.00
			ı

SCHEDULE III - LIABILITIES

Name ANDREA LEUGH MCGEC

Page 3 of 4

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

								Amou	Amount of Liability	Liabil	ĮΫ			Ш
SP,	Proditor	Date Liability		A	В	ဂ	O	т						, ×
J Ç	Creditor	Incurred mo/year	lype or Liability	\$10,001 \$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	\$25,000,001 \$25,000,000	\$50,000,000	Over \$50,000,000 Spouse/DC	Liability over \$1,000,000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				<u>×</u>					Ш		
	SALLE MAG	9.09	9.09 STUBENT LOAN		×	ļ								
	Discover	01.11	11.10 STUDENT LOAN	×										
	AMERICAN EXPRESS	い。年	5. # CREDIT CARD		*		1	<u> </u>				ļ		

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); and positions solely of an honorary nature

and positions solely of an nonorary nature.	ature:
Position	Name of Organization
Pausionst	DRINGED MERMAND, INC.
board member	GOLD COAST DAZZ SOCIEDI

SCHEDULE V — AGREEMENTS

Name ADDREA LEIGH MCGEE

Page 4 of 4

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

on par mana	on pair trainer by a former emproyen.	
Date	Parties To	Terms of Agreement
	7 7	

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.

Tecognized by law. Do not repeat intomiation nated on ocheans is	
Source (Name and Address)	Brief Description of Dutles
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
LATES 1848 IFISHERING	PRITOR
Character the Devil the	Consell Perputtion & Punning Local Cerus