₹	Yes	pendent child	"unearned" income, transactions, or liabilities of a spouse or dependent child unless you have first consulted with the Committee on Ethics.	ned" income, transa you have first cons	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
₹	Yes 🔲	ot be	ertain other "excepted trusts" need no	tee on Ethics and c	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?
S	QUESTION)F THESE (ON — ANSWER EACH OF THESE QUESTIONS	INFORMATION	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	esponse.	each "Yes" re	and the appropriate schedule attached for each "Yes" response	and the approp	Each question in this part must be answered
₹	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.	No X If 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.
8	Yes 🔀	angement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	No With an H 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? Yes If yes, complete and attach Schedule II.
8	Yes X	efore the date ir 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.	No IV. Did of filing If 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? Yes yes, complete and attach Schedule I.
			JESTIONS	F THESE QU	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTION:
	o days fale.	Hore Hall 30 days late			employee Employing Office:
assessed who files		A \$200 penaity shall be against any individual	Check if Amendment	Date of Election:	Filer Candidate for the State: WY House of Representatives District: W3 New officer or
	(Office Use Only)	() (
IE CLERK RESENTATIVES	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	N.S.	shone:	Daytime Telephone:	Name: Evalli Jewicius
Tage 1 or 4 DURCE CENTER PM 1:49	LEGISLATIVE RESOURCE CENTER 2014 MAY 22 PM 1:49	LEC	FORM B For use by candidates and new employees	For use t	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2913 - ハーリラーないは

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

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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	ement programs, and benefits re	benefits received under the Social Security Act.	ecurity Act.
Source (include date of receipt for honoraria)	Tvne	Amount	unt
(Indiana date of feedby to Hollotatia)	1 7 7 6	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
7	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
west Visioning State Marlied Law Checkshop Col	School	67 020.7	139,231.00
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Lymas	61 7	P:1.9/4	Beck.	Allstek	Murgu St	JT	DC, Examples:	SP, SP	ing \$5,000 or less in personal chec accounts; and any financial interess derived from, a federal retirement pre the Thrift Savings Plan. If you so choose, you may indicate income source is that of your spouse dent child (DC) or is jointly held with yin the optional column on the far left. For a detailed discussion of Schedule please refer to the instruction bookdet.	Exclude: Your pers homes and vacation income during the re	For an ownership in that is not publicly to ness, the nature of location in Block A.	For rental or other real property held provide a complete address or a durental property," and the city and state.	For all IRAs and oth plans) provide the account that exceed	Provide complete names o (do not use ticker symbols).	identify (a) each ass of income with a fair the end of the repreportable asset or a more than \$200 in "	Asset and	
General Electric Shock	le shick	y Ins Stock	1 huserum Stock	Gorp Stock	Standy Bank Bapusit		Simon & Schuster	SP Mega Corp. Stock	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 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 homes and vacation homes (unless there was rental income during the reporting period); any deposits total-	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) any offier reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source	BLOCK A
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┝─	 	┼	ļ	+	1	┢	Indefinite	×	\$50,001 - \$100,000		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.	۷a	
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	<u> </u>				1	<u> </u>	₹	\square	Other Type of Income		<u> </u>	j ë		bians or (RAs), you may check the Tax-Deferred" column. Dividends,	sperate s 40	æ	
						L	Royalties		(Specify: e.g., Partnership Income or Farm	n Income)	+		if reinvested, must be disclosed as income. Check "None" if the asset penerated no income	g de fe	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate taxdeferred income (such as 401(k))		
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									\$1 - \$200	=		ł	* This column is for income spouse or dependent child.	income. Check "None" if no income was earned or generated.	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		
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			رين ٿي.					H	Spouse/DC Income over \$1,000,000	<u>×</u> >*≚	4		This column is for income derived from assets solely held by your pouse or dependent child.	୍ର ପ୍ର	<pre>lecked "Tax-Deferred" in Block C, you r or all other assets, indicate the categor propriate box below. Dividends, inter if reinvested, must be disclosed</pre>	Amount of Income	BLC
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Page 4 of 9

Spouse/DC Income over \$1,000,000*

Continuation Sheet (if needed)

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Spouse/DC Income over \$1,000,000*

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Asset and/or Income Source None Asset and/or Income Source	Asset and/or Income Source Value of Asset None \$1,4 50 \$1,000 \$2,000 \$1,000 \$250,000 \$1,000,001 \$250,000 \$1,000,001 \$25,000,000 \$1,000,001 \$25	Asset and/or Income Source	BLOCK A
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Page 1 of 5

SCHEDULE III — LIABILITIES

ame Evan Joshan

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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 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

						SP, DC, JT	
					Example: First Bank of Wilmington, DE	Creditor	
					May 1998	Date Liabllity Incurred mo/year	
					Mortgage on 123 Main Street, Dover, DE	Type of Liability	
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	*					Over \$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.

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 nonorary nature.	ature.
 Position	Name of Organization
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 Office Bred	Fosk Foundation Inc. Our Dolet Ventucker will
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Use additional sheets if more space is required

SCHEDULE V — AGREEMENTS

Page 1 of 2

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.

Oil, Did	on plan mamad by a former employer.	
Date	Parties To	Terms of Agreement
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٠		function as State Seacher.

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 1.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
GPO: 2013 78-995 (mac)	