E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? C. Did you or your spouse have "earned" income (e.g., salaries B. Did you, your spouse, or your dependent child purchase, sell, or A. Did you, your spouse, or your dependent child **EXEMPTION** – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three **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 that benefits you, your spouse, or dependent child? **IPO** – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. honoraria, or pension/IRA distributions) of \$200 or more during the exceeding \$1,000 during the reporting period? exchange any securities or reportable real estate in a transaction PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS Name: WILLIAM STEVE DOUTHERLAND II 2013 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics IPO, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS reporting period? REPORT TYPE FILER STATUS Make more than \$200 in uneamed income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or U.S. House of Representatives 2013 Annual (Due: May 15, 2014) Member of or Candidate for State: District: 200 FLORIDA Yes Yes ¥es Yes Yes No Daytime Telephone: 202-225-5235 Amendment Š Š Š S 0 For Use by Members, Officers, and Employees 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? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the \$350 in value from a single source during the reporting period? reportable travel or reimbursements for travel totaling more than H. Did you, your spouse, or your dependent child receive any **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? Form A Employee Officer or **Employing Office:** Termination Date: OFFICE OF THE CLERK HAND DELIVERED® 1 of 5 LEGISLATIVE RESOURCE CENTER 2014 JUN 1 1 AM 10: 17 Ύes Yes Υes Yes Yes Yes Yes Ž S. Z Z Z S ŏ 区 × \boxtimes

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	TRUSTMARY SAVINGS ACCOUNT	MERSILL LYNGH OGSHALLOWT	MACHUSE INC. STOCK	FINERA SERVICE INC. SHOW	258 in BALDWIN BOAD	ABC Hedge Fund X	Examples: Simon & Schuster	SP Mega Corp. Stock EIF	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. For bank 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, e.g., "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 homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or including the Thrift Savings Plan. If 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 of your spouse (SP) or of come source is that of your spouse (SP) or of come adailed discussion of Schedule A requirements, please refer to the instruction booklet.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in "uneamed" income during the year.	BLOCK A Asset and/or Income Source
Н								"	None >			コ
		eldin.		i. Žisto					SEA	n ever	ate va ation m asset asset	
							Indefinite		\$1,001-\$15,000 C	you nave no interest.	Indicate value of valuation method used: If an asset was a because it general Column M is for a	
							•			Š	asset other t	
NAME OF TAXABLE PARTY.	80 W/2	-	2022004	80270	0.000,00790	atema atema		×	\$50,001-\$100,000 m		at closhan fail han fail uring thome, the	Vai
					1,020		9	- 6	\$250,001-\$500,000		se of t r marke he repo he value yours	BLOCK B
		2.0				×			\$250,001-\$500,000 o		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	BLOCK B
								200,271	\$1,000,001-\$5,000,000 —		orting s, pleas period d be "h	<u> </u>
					J.		22.1				period. se spec and is fone."	ı
45.4	e side	i de la constante de la consta		34.3°	1900		SEAL OF		\$25,000,001-\$50,000,000		if you sify the includ	
									Spouse/DC Asset over \$1,000,000°		methor methor	
25							- inter			penod.		\neg
120-220			49848	X				×	DIVIDENDS	×	Check all columns that apply. For accigenerate tax-deferred income (such as 401 529 accounts), you may check the "Ta column. Dividends, Interest, and cap even if reinvested, must be disclosed for assets held in taxable accounts. Chif the asset generated no income during the columns.	
											colum x-defe nts),) Divide investe heid i	_
***				20 V.	2,520	7 E E		2.3,2	INTEREST		ns than med involution made, inclusion mused, inclusion mused, inclusion mused, inclusion taxan mated in	ype ₽
die v	Model.						rac A		EXCEPTED/BLIND TRUST		t applicame (come (come (meres) che av che a	BLOCK C
								1/14			y. For such as such as ck the t, and t, and disclose counts.	BLOCK C
						Partnership Income	Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		counts that (k), IRA, or x-Deferred ttal gains, as income eck "None" to reporting	
					di.					*Colun	For assets may check category of Dividends must be accounts.	
			eg.	X		4817		5100	\$1-\$200 =	ahich ¥hich	may check the "None" category of income to Dividends, interest, must be disclosed a accounts. Check generated.	
	() t 4		***				,	×	\$1,001-\$2,500 <	is for a	which) e "None ncome nterest, closed Check	、I
		azat (7 () ()		3.1			- (0) - (2)	\$ 5,001- \$ 15,000 ≤	*Column XII is for assets held by your spouse or dependent child in which you have no interest.	ou check column. y check and call and call as incolumn.	BLOCK D Amount of Income
										est. y	ed "Tax-Deferre For all other a king the appropriate gains, even me for assets if no income	BLOCK D
Skradky	******	700.04	*******		NAME OF THE OWNER, OWNE	2.24500	2005.200.0	al distriction	\$50,001-\$100,000	our sp	k-Defer Ill other e appr e appr sins, e saser incom	COM
									\$1,000,001-\$5,000,000 ×	ouse o	red" in E assets opriate opriate wen if ts held e was	
			1110				3.4	Silv	\$1,000,001-\$5,000,000 ×	уг фер∉	" in Block C, you sets indicate the sets indicate the riate box below. In if reinvested, held in taxable was earned or	
				100					Spouse/DC Asset with Income over \$1,000,000°	andent		
								S(part)	please follows: Leave I bleave I that exc \$1,000.	If only	Indicate if asset had purchases sales (S), exchanges in the report	B Trai
					ß				please indicate so a follows: (\$ (part)). Leave this column blank if there are no transactions that exceeded \$1,000.	period. If only a portion of	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting	BLOCK E
									arti)). Silman are	on of	, (U) (J) (J) (J) (J) (J) (J) (J) (J) (J) (J	ion

SCHEDULE B - TRANSACTIONS

Name: WILLIAM STEVE SOUTHERLAND IT Page 3 of 5

																	JT 528 W. BALDWIN KOAD FAMAMA CITY, FL.	SP Example Mega Corp. Stock	SP, DC, JT Asset	the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. *Column K is for assets solely held by your spouse or dependent child.	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check	resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.	reporting priod of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions that	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the
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. C. (c.										10.5564					3.00		×			Sale	As d		Type of Transaction	A Af Tran
																				Exchange	en s		Saction	antion.
																		×		Check Box Exceeded	if Cap \$200	ital Gain		1
													1				611413	3/5/13		applicable	Monthly, or Bi- weekly, if	(MO/DAYR) or Quarterly,	7216	T nata
																								1
				100				(12.4)								4 -10		×		\$15,001- \$50,000		a V	er vij	
																				\$100,001- \$250,000		- 6		
																					1		Amount of	A
	General Control												City and			•	X			\$500,001- \$1,000,000		7		í Tana
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7	2			10.1			500	10.0		η υ							10.15			\$25,000,00	00	I		
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			l				<u> </u>	1	1	}	ļ	ļ	 	ļ	ļ		1	1		Over \$50,0	000,000) _	.	ļ

SCHEDULE D - LIABILITIES

	Name: المراكب
a second describing	Name: While Steak SouthErigad II
Manda Atta Himbanda and	RLAND II
	Page 4 of 5

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); 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 you by a spouse or the child, parent, or sibling of you or your spouse. *Column K is for liabilities held solely by your spouse or dependent child. Report a revolving charge account (i.e., credit card) only if the balance at the close of reporting period exceeded \$10,000.

							Amount of Liability	t of Lia	ability			-
SP.	Creditor	Date Liability Incurred MO/YR	Type of Liability	\$15,001-	\$50,000	\$100,001- \$250,000	\$200,000 \$200,000	\$500,001- \$1,000,000	\$1,000,001F - 3 C C C C C C C C C C C C C C C C C C	\$5,000,001- \$25,000,000 ±	\$75,000,001- \$80,000,000 Over \$50,000,000	Over \$4.000 poor (S) = 10° (See 1)
	Example First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE			×						
7	BANK OF AMERICA (PAID-OFF)) 8/2007	WOULEY OF STANDARD KOYD				X					
7	SALTA LVER	6 2006	BOAT	Constant Constant	802 03	×						
7	BANK OF AMERICA (PAID-OFF)	10/2005	10 2005 BOOKE STANKADE.			×					at a	
4	TRUSTMARK BANK	7 2013	MORTE AFE ON PRE			×						
9	TENSTMARKIBANK PANDOF) 12/2010 HONE EQUITY	F) 12/2010	HONG EQUITY	X								
SCH	SCHEDULE E - POSITIONS			•								

SCHEDULE E - POSITIONS

consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or

Position	Position Position Name of Organization

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

	ι
Name: VJWAW STEVE SOUTHERLANDIN	
Page V of S	1

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk; travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

		٠				
	Source	Date(s)	City of Departure – Destination — City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
n S	Government of China (MECEA)	Aug. 6-11	DC-Boiling, China - DC	γ	~	z
Compress.	Habitat for Humanity (charity fundralser)	Mar. 3-4	DC-Boston-DC	Υ	۲	4
H 3HI	THE HERITAGE FOUNDATION	Fers 6-8	DC-BAUTIMORE, MD-DC	٧	~	۲
			1777			
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