

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	2014 SEP 17 PM 7: 19
Name: Dorkue Serveyer Da	Daytime Telephone	U.S. HOUSE OF REPRESENTATIVES
New Member of or Candidate for State:  U.S. House of Representatives District:  Candidates – Date of Election:	Check if Amendment	(Office Use Only)
STATUS  New Officer or Employee  Employing Office:	Period Covered: January 1, 20(3)	A \$200 penaity shall be assessed against any individual who files more than 30 days late.

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 in the current calendar year up through the date of filing? b. Make more than \$200 in unearmed income from any reportable asset during the reporting period? C. Did you or your spouse have 'barried' income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?  ATTACH THE CORRESPONDING SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE  E. Did you hold any reportable positions during the reporting period?  F. Do you have any reportable agreements or arrangements with yes I no I no utside entity?  J. Did you receive compensation of more than \$5,000 from a single yes I no I source in the current year and two prior years?  ATTACH THE CORRESPONDING SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE			
Pes No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?  F. Do you have any reportable agreements or arrangements with an outside entity?  J. Did you receive compensation of more than \$5,000 from a single year E CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	S THAT YOU ARE REQUIRED TO COMPLETE	NLY THE SCHEDULE	THIS FORM INCLUDES C
Pes No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?  Pes No F. Do you have any reportable agreements or arrangements with Yes an outside entity?  J. Did you receive compensation of more than \$5,000 from a single yes source in the current year and two prior years?	CHEDULE IF YOU ANSWER "YES"	CORRESPONDING SC	ATTACH THE
re than \$1,000 at the 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?  F. Do you have any reportable agreements or arrangements with Yes an outside entity?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?		Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
re than \$1,000 at the Yes No E. Did you hold any reportable positions during the reporting period Yes or in the current calendar year up through the date of filing?		Yes 🔀 No 🗌	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
		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?

# EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

<b>₹</b>	Yes .	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 tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
8 <b>(*</b>	Yes	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?

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Traus	S	7	77		E.		For bank and other cesh accounts, total the amount in fail inderect-bearing accounts. If the total is over \$5,000, list every financial institution where there is more then \$1,000 interest bearing accounts. For retal and other real property held for investment, provide a complete address or description, e.g., rental property, and a city and state.  For are ownership interest in a privately-held business that is not puskey braded, state the name of the total property, and a city and state.  For are ownership interest in a privately-held business that is not puskey braded, state the name of the total property and a city and state.  For an ownership interest in a privately-held business that is not puskey braded, state the name of the total state of the complete of the property of the total state of the complete of the property of the total state of the property of the total state of the pour as privately-raded fund that is an Exception investment Fund, plesse check the EIF box.  If you have a privately-raded fund that is an exception in the politicals that an asset or dependent chald (ICD), or jointly had with anyone (IT), in the optional column on the fair left.  For a detailed discussion of Schedula A requirements, please refer to the instruction booklet.	For all IRUAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the arrowant that occased the recognition thresholds.	Provide complete латеs of stocks and mutual funds (do not use only ticker symbols).	ncome which generated more unearned income during the year.		Assets and/or income Sources	
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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DULE A - ASSETS & "UNEARNED INCOME"	
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### SCHEDULE C -- EARNED INCOME

Name: Darlene	
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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's 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.

Source (include date of receipt for honoraria)  ABC Trade Association, Battmon, MO Luly 15)  Size of Maryland Chill Wir Roundale, Richmond, VA (Oct. 2)  Charles County Beard of Education  Allimany  Allimany	Type  Horosalum Salary Spoules Speeds Spoules Salary  Soules Salary  Spoules Salary	Current Year to Filing  50  50  50  10  10  10  10  10  10  10	Amount Preceding Year  \$5000 \$1,000 \$1,000 N/A  \$3,458  43,491

#### SCHEDULE D - LIABILITIES

Name: Darten Senger
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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. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence (unless you are 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. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

			sp. Dc, лг		
	 	Example			
		First Bank of Wilmington, DE	Creditor		
		5/98	Date Liability Incurred MO/YR		•
		Mortgage on Rental Property, Dover, DE	Type of Liability		
			\$10,001- \$15,000	>	
			\$15,001- \$50,000	<b>6</b>	
			\$50,001- \$100,000	c	
		×	\$100,001- \$250,000		l <sub>&gt;</sub>
			\$250,001- \$500,000	m	<b>Amount of Liability</b>
			\$500,001- \$1,000,000	71	t of Lie
			\$1,000,001- \$5,000,000	Ø	Billity
			\$5,000,001- \$25,000,000	2	
 			\$25,000,001- \$50,000,000	_	
			Over \$50,000,000	-	
			Over \$1,000,000* (Spouse/DC Liability)	*	

#### SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or 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. New Members and second-year candidates report

positions held in the reporting period and the current calend	positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.
Position	Name of Organization

#### SCHEDULE F - AGREEMENTS

Name: \\	
arter Senser	
Page Le_ of	

		Date	identify the date
		Parties to Agreement	identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence du continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare
		Terms of Agreement	ve with respect to: future employment; a leave of absence during the period of government service; emment; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

## SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

	The second secon
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
and the second	

FILER NOTES (Optional)

Name as time Senger Page Tot

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