» X	Yes	ependent child	e, transactions, or liabilities of a spouse or dependent child irst consulted with the Committee on Ethics.	arned" income ss you have fir	EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liab because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the
No X	Yes 🔲	not be	cs and certain other "excepted trusts" need not be spouse, or a dependent child?	nittee on Ethic iting you, your	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted t disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?
S	QUESTION	OF THESE	MATION — ANSWER EACH OF THESE QUESTIONS	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	response.	each "Yes"	appropriate schedule attached for each "Yes" response	d and the a	Each question in this part must be answered and the appropriate sche
S □	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.	S □	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes, complete and attach Schedule III.
<u>용</u>	Yes	rrangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	8	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.
No X	Yes	before 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.	S _o	I. Did you or your spouse have "earmed" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes Yes, complete and attach Schedule I.
			E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
	more than 30 days late.	more than			employee Employing Office:
assessed who files	A <i>\$200 penalty</i> shall be a against any individual w	A <i>\$200 pe</i> against ar	Check if Amendment	Date of Election:	Filer Candidate for the State: AST House of Representatives District: 1/
	(Office Use Only)	C.			
NTATIVES	CEFICE OF THE CLERK		Daytime Telephone:	Daytime	Name: TOUMAND & VAN ELANN (fice)
Page 1 of Z CE CENTER 1: 27	Page 1 of	1.Ecisi	FORM B For use by candidates and new employees	71	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 30/3 - PALAC 30, 30/7

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name RICHAM EVANGLAHN

Page of

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.	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
	. 9 %	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Etamples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
;	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
PICAL VANGLAHN + SONS LLC	SALARY	5,0000	15,000,000
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	て					H	<u>m</u>	.0	income during the reporting period); any deposits total- 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 depen- dent 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	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., "ental property," and the city and state.	(do not use ticker symbols). 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.	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 other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Þ	
HUDS-H CATY-SAVINDS	VALLEY NATIONAL BANK	VALLEY NATURAL BARK	SANTAU OIL SAVINDS	RESIDENTIAL	ZESIOGNTIAL -MT		Examples:		duri duri ts: sts: s fror so cl so cl sou ption refer	. ₹		prop c	IRAs provi	(a) e	Asset and/or Income Source	
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73	38	A	3	6	*	1st Bank of Paducah, KY accounts	Simon & Schuster	SP Mega Corp. Stock	sss ()); an check rest t pro ate t ouse with your with your with dule	,öö = ==	watel and	held a d	dans has thre	exce and and me v	7	
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l				 	 	×	(D)		\$100,001 - \$250,000		771	*This column is for assets solely held by your spouse or dependent child.	ing year and is included only because it generated income, the value should be "None."	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. If an asset was sold during the report-	Value of Asset	몓
			<u> </u>	×	\sim	Ť	 		\$250,001 - \$500,000		Ω	l de x	ne,	ass n fa n fa	<u>Q</u>	вгоск в
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X	X	×			 	t			TAX-DEFERRED			during the reporting period.	"lax-belerred column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset consisted in income.	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the	Type of Income	
							Royatties		Other Type of Income			1 5		ate t	ō	
							lties		(Specify: e.g., Partnership Income or Farm Inc	ome)		ā	even dis-	# (S) * # # 2 0		
X	X	\times							None	_			<u>د</u> *	프 열 크 우 기		
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\vdash						┪	 	\vdash	\$5,001 - \$15,000 \$15,001 - \$50,000				* This column is for incoms spouse or dependent child.	r which you chane" column. Falecking the ap gains, even ck "None" if no		
l		L	<u> </u>	l	 	H	-		\$50,001 – \$100,000	_	1 2		or i	one Signification		i
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				<u> </u>		Ī	İ		\$1,000,001 - \$5,000,000	×			d. me	고 <mark>후</mark> 고 오	Ĭ	
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					<u> </u>	Į	Ļ		Spouse/DC Income over \$1,000,000*	×		4	rive Me	ein ein	≓ o	Бĺ
	×	*		<u> </u>		L		Ц	None				This column is for income derived from assets solely held by your couse or dependent child.	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 income. Check "None" if no income was earned or generated.	Amount of Income	BLOCK D
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						1	-	\Box	\$50,001 - \$100,000	¥H VII	Year	1	ž	era district		
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									\$1,000,001 - \$5,000,000	×			ьy	arred" in Block C, you lets, indicate the categor slow. Dividends, intermust be disclosed arned or generated.		
			ļ			L			Over \$5,000,000	×			you	may ry of rest, l as		
]	l		1		Spouse/DC Income over \$1,000,000*	×			_ =	0 7 X X		

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name RICKAND VANGLAHN

Page_4

						77		лт, вс	SP.		
						LAND-S.CHROLINA	HUDSON COTH SAMNES			Asset and/or Income Source	BLOCK A
						X		None \$1 - \$1,000 \$1,001 - \$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 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000 Spouse/DC Asset over \$1,000,0	A B C D E F G H I J K L M	Value of Asset	всоск в
						X	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income(Speci		Type of Income	вгоск с
						X	×		Current Year	Amount (ВГО
						X	X	None	Preceding Year	Amount of Income	BLOCK D

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SCHEDULE III — LIABILITIES

Name RICHARD VANGLUN

Page 5 of 7

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.

			37	57		SP, DC, JT
			ST SANGAUGEL GANK	SANTANDOR BANK	Example: First Bank of Wilmington, DE	Creditor
ı		``	4/4/08	4/7/08	May 1998	Date Liability Incurred mo/year
			Mokeabb ON DENVINDERS	4/7/08 MORTOAGO ON AGLENANG.	Mortgage on 123 Main Street, Dover, DE	Type of Liability
						\$10,001— \$15,000
						\$15,001— \$50,000 W
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				-	Ĥ	\$250,000
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						\$1,000,001— G \$5,000,000 G
						420,000,000
						\$25,000,001 \$50,000,000
						\$50,000,000 Spouse/DC
	<u> </u>				L	Liability over ス \$1,000,000

SCHEDULE IV — POSITIONS

cer, 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. 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-

and positions solely of an honorary nature Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

		_		
			Position	ally positions solely of all hollorary Hature.
	N/B		Name of Organization	aluic.

SCHEDULE V -- AGREEMENTS

Name RICHARO E VANGLAUN Page L of 7

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 ben-

			·	Date	efit plan mainte
		N/A		Parties To	efit plan maintained by a former employer.
				Terms of Agreement	

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.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
HETHOTHAN, MOHAS TOWNSHIP N.J.	CONSTRUCTION SOMIMS
Mr. LAYIN , THROOUTH NJ.	
Mrs. Hugling Danning Nis.	
MF. GUALFTELL, SULLUSUMMA NIJ	1.1
RESULLECTION PARISH. RANGOLD N.J	
MRS. HUDSON, GNOOLPH IN J'	11
MAS. FLANAGAN, BANGOLLA N.J.	

CONTINUED ON MOST SHIET.

GPO: 2013 78-995 (mac)

SCHEDULE V -- AGREEMENTS

Name CICHARO VANGUHN

Page 2 of 2

•		
Date	Parties To	Terms of Agreement
9		
	N/A	
	('	

CONTINUED FROM Phot SHEET

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.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
HR WEAVEL, LANDOUGH N.S.	Constaugion SERVICES
THE STINTON, PONDOLPH NJ.	
ML GOLINSKI, OGNVILLE N.J.	1.7
MK MAZOWSKI, PANDOURA NJ.	
THE GOCHE, LANDOUGH N.J.	