UNITED STATES HOUSE OF REPRESENT FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2011 - Mov 13 Name: James 1, 2011 - Mov 13 Name: James 1, 2011 - Mov 13 Name: James 1, 2011 - Mov 13 New officer or Employing in all sections, please type or print clearly in blue or black ink PRELIMINARY INFORMATION — ANSW 1. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	OF REPRESENTATIVES STATEMENT O[1] - Mov 13 ; 2012 Por use by candidate Por use by candidate Date of pate of pate of Election: [1] / 6 / 12 Employing Office: Employing Office: Income (e.g., salaries or the reporting period? No No Income (e.g., salaries or the reporting period? No No Income (e.g., salaries or the reporting period? Por use by candidate For use by candidate	Daytime Date of Election:		es and new employees Check if Amendment Amendment colendar year or in the print to colendar year		RESOURCE CENTER RESOURCE CENTER REPRESENTATIVES (Office Use Only) Yes No
 Did you or your spouse have "earned" income (e.g., salaries fees) of \$200 or more from any source in the reporting period? if yes, complete and attach Schedule I. 	악		IV. Did you hold any re of filing in the current c if yes, complete and a	reportable positions on or before the date calendar year or in the prior two years?	before the date or two years?	№
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.	nild receive "unearned" period or hold any the end of the period? Yes	No U	V. Did you have any re with an outside entity? If yes, complete and a	reportable agreement or arrangement /? d attach Schedule V.	rangement	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.	hild have any report- reporting period? Yes	₹	VI. Did you receive cor a single source in the to if yes, complete and a	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.	\$5,000 from	Yes
Each question in	Each question in this part must be answered and the appropriate sch	and the a		edule attached for each "Yes" response	each "Yes" re	sponse.
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a depen	Blind Trusts" approved by the Comr	nittee on Ethici ting you, your		"excepted trusts" need not be dent child?	ot be	Yes
EXEMPTION —Have you excluded from this report any other assets, heralise they meet all three tests for exemption? Do not answer "yes"	om this report any other assets, "une	"unearned" income, transactions, or lia	"unearned" income, transactions, or liabilities of a spouse or dependent child	lities of a spouse or du	annodomė ohild	

BLOCK A Asset and/or income Source	BLOCK B Value of Asset	BLOCK C Type of Income	Amount of Income
identify (a) each asset held for investment or production	Indicate value of asset at close	Check all columns that apply. For	assets
mentiny (a) each asset retor 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.	of reporting year. If you use a valuation method other than fair market value, please specify the	retirement accounts that alphy, not allow you to choose specific investments or that generate tax-deterred income (such as 401(k)	For assets for which you checked "lax- Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the
Provide complete names of stocks and mutual funds (do not use ticker symbols).	if an asset was sold during the	plans or IRAs), you may check the "Tax-Deferred" column. Dividends,	appropriate box below. Dividends , Interest, and capital gains, even if reinvested, must
For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you	reporting year and is included	interest, and capital gains, even if reinvested, must be disclosed	be disclosed as income. Check "None" if no income was earned or generated.
have the power, even if not exercised, to select the spe- cific investments), provide the value for each asset held in the account that exceeds the reporting thresholds.	income, the value should be "None."	as Income. Check "None" if the asset generated no income during the reporting period.	
provide only the name of the institution holding the account and its value at the end of the reporting period.	ABCDEFGHIJKL		
For rental or other real property held for investment,			Burnocon Report No.
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		rm Income	
Exclude: Your personal residence, including second homes and vacation homes (unless there was rental	D		
income during the reporting periods, any deposes wearing \$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.	000 0,000 0,000 00,000 000,000 5,000,000	IND TRUS	0 00 000 0,000 000,000 5,000,000 00 00 00 000 0
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.	\$1,000 01 - \$15,0 001 - \$50,0 001 - \$100,001 - \$250,001 - \$50,001 - \$50,001 - \$00,001 - \$00,001 - \$50,000,001 - \$50,000,001 - \$50,000,000,000,000,000,000,000,000,000,	DENDS T REST ITAL GAIN EPTED/BL DEFERRE or Type of L Hy: e.g., Per	\$200 01 - \$1,000 01 - \$2,50 01 - \$5,00 01 - \$15,00 001 - \$10 001 - \$10 0,001 - \$1 00,001 - \$1 0,001 - \$1 0,001 - \$1 0,001 - \$1 0,001 - \$1,000 01 - \$2,50 01 - \$15,00 001 - \$15,00 001 - \$10 0,001 - \$10 0,001 - \$1
For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	\$1,00 \$15,0 \$50,0 \$100 \$250 \$1,00 \$5,00 \$25,0 \$ver	REN INTE CAP EXC TAX- Other (Special	\$201 \$1,0 \$2,5 \$5,0 \$15, \$50, \$100 \$1,0 \$1,0 \$1 - \$20 \$1,0 \$1,0 \$1,0 \$1,0 \$1,0 \$1,0 \$1,0 \$1,
SP, SP Mega Corp. Stock	×	X	X
DC, Examples: Simon & Schuster	Indefinite	Royalties	××
		_	<
Dank of timetica	2		
USAA	×	XXX	×
Trade Station	×		
PFG	×		
Price Futures	*		
RJ Obrien	*		

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

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	Donalds	JOHNSON III		Beckinten Dickson	Altria	Microsoft	Bloom Estate	ev	Dava Savers Club	Ishares Silver Trust	Market Vectors ETF		Asset and/or Income Source	BLOCK A	Company Succession
X	* *		*	×	X	×			×	*		None	Value of Asset	BLOCK B	
						×	×	χ				NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Type of Income	BLOCK C	
						×						None - \$1 - \$200 = \$201 - \$1,000	Amount	18	
						×	×	×				Over \$5,000,000 ≤ None - \$1 - \$200 = \$201 - \$1,000 ≡ \$1,001 - \$2,500 ≤ \$2,501 - \$5,000 ≤ \$5,001 - \$15,000 ≤ \$50,001 - \$100,000 ≡ \$50,001 - \$100,000 ≡ \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 ×	Amount of Income	BLOCK D	

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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Contin	Continuation Sheet (if needed) BLOCK A Asset and/or Income Source	BLOCK B Value of Asse	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	BLOCK C	Name DIMES
		\$1 - \$1,000	\$25,000,001 - \$50,000,000 × Over \$50,000,000	RENT	RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)
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2	Triangle	X X			
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318	Spee Hup	× ×		Į	
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SCHEDULE III - LIABILITIES

Name James Lee Post ma

Page 5 of 2

owed 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 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 sib-

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		58		SS		7 C S	╽
		Sum Life	Chase	Schwalo	Example: First Bank of Wilmington, DE	Creditor	
	C	May 2006	Marsous	Nonzas	May 1998	Date Liability Incurred mo/year	
		Land Loan-Addreson Islan		· Line of Credit	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
		\	7			\$10,001 \$15,000	
		^			┞	\$50,000 W	١
				X	×	\$100,000	≥ -
			-		-	\$250,001— m	
-			<u> </u>		┝	\$500,001— \$1,000,000	Amount of Liability
						\$1,000,001— \$5,000,000	E P
1						\$5,000,001— \$25,000,000 ±	Ì
						\$25,000,001 \$50,000,000	
		l .	ı	1		Over	

SCHEDULE IV - POSITIONS

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 officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

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);

	Presiclen+	Western Airlines . Tus
	President	Western Airlines, Inc
45	Vice President	Western Airlines, Inc