UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 204 - Dec 51, 2011 For use by candidates and new employees Name: (を知らいしない しんが しゅう ひまい サー・ Daytime Telephone:	LEGISLATIVE RE 2012 JAN 11	Page 1 of 7  LEGISLATIVE RESOURCE CENTER  2012 JAN 11 PH 12: 12  OFFICE OF THE CLERK
LABIUSAN TE	U.S. HOUSE OF RE (Office Use Only)	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES (Office Use Only)
Filer Candidate for the State: NC Date of House of Representatives District: D8 Election: 11/6/20/2 Amendment Status New officer or Employing Office: Transport Property of Table 11/8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives District: D8 Election: 11/6/20/2 Amendment The status of Representatives D1 Election: 11/6/20/2 Amendment The status of Representative D1 Election: 11/6/20/2 Amendment The status of R	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	who files
n all sections, please type or print clearly in blue or black ink.  PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS		
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 Volume No Volume in the current calendar year or in the prior two years?  If yes, complete and attach Schedule I.	efore the date Yes	S.
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, complete and attach Schedule II.	angement Yes	No.
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  Yes 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 III.	5,000 from Yes	<b>₹</b>
Each question in this part must be answered and the appropriate schedule attached for ea	le attached for each "Yes" response.	
XCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF	WER EACH OF THESE QUESTIONS	SNC
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?	ot be Yes	Ş Ş
<b>EXEMPTION</b> —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.	pendent child Yes	S G

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name

Page 2 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.

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	100	07			_1	7_	1-		σ.	that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. <b>Exclude:</b> Your personal residence, including second homes and vacation homes ( <i>unless</i> there was rental income during the reporting period); any deposits totaling the state of the resulting period); any deposits totaling the state of the resulting period); any deposits totaling the state of the reporting period); any deposits totaling the state of the resulting the state of the resulting the state of the source is that of your spouse (SP) or dependent of the source is that of your spouse (SP) or dependent of the source is pointly held with your spouse (JT), in the optional column on the tar left.  For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business	account and its value at the end of the reporting period For rental or other real property held for investment provide a complete address	Asset and/or Income Source  Asset and/or Income Source  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. Provide complete names of stocks and mutual funds (do not use ticker symbols).  For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, to retirement accounts which are not self-directed, to only the name of the institution holding the
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

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#### SCHEDULE III - LIABILITIES

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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. owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); 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 a spouse, or the child, parent, or sib-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

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#### SCHEDULE IV - POSITIONS

prise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. cer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enter-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);

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### SCHEDULE V — AGREEMENTS

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			NONE.	Parties To	Identify the date, parties to, and general terms of any agreement or arrangement with service; continuation or deferral of payments by a former or current employer other the effit plan maintained by a former employer.
				Terms of Agreement	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.

# 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
NOWE,	