8 □	Yes	pendent child	silities of a spouse or de Committee on Ethics.		arned" income ss you have fire	er assets, "une wer "yes" unles	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or lial because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the	ON - Have you exclud by meet all three tests	because the
8 <	Yes	ot be	epted trusts" need no	s and certain other "excesspouse, or a dependent	nittee on Ethicating you, your	d by the Comn a trust benefi	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?	Details regarding "Quarter you excluded fro	TRUSTS- disclosed. H
S S	QUESTION)F THESE	ANSWER EACH OF THESE QUESTIONS	1	TINFORM	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	ION OF SPOU	EXCLUS
	response.	each "Yes" r	ile attached for	ppropriate schedu	and the a	answered	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	Each questio	
™	Yes	\$5,000 from	mpensation of more than stwo prior years? attach Schedule VI.	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.	N ₀	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.	your spouse, or a depen more than \$10,000) duri lete and attach Schedu	III. Did you, able liability (If yes, comp
š 	Yes	rangement	eportable agreement or arr	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	<u>\$</u>	Yes 🖸	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.	our spouse, or a depend ore than \$200 in the repo- iset worth more than \$1, lete and attach Schedu	II. Did you, y income of mo reportable as if yes, comp
<u>8</u>	Yes 🖸	before the date or two years?	reportable positions on or before the date calendar year or in the prior two years? attach Schedule IV.	IV. Did you hold any repor of filing in the current cale If yes, complete and atta	Š	Yes 🖸	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? If yes, complete and attach Schedule I.	your spouse have "earn or more from any source lete and attach Schedu	I. Did you or fees) of \$200 If yes, comp
				ANSWER EACH OF THESE QUESTIONS	OF THES	R EACH		PRELIMINARY INFORMATION	PRELIMI
assessed who files	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 pen against and more than 3	Check if Amendment	1 1 2 14	Date of Election:	09	Candidate for the House of Representatives District:02 New officer or Employing Office	Candidate for the House of Repress New officer or employee	Filer Status
	S. HOUSE LE REPRESENTATIVES (Office Use Only)	S. HOUSE OF R		Daytime Telephone:	Daytime		084	PAWL HANNOSH	Name:
Page 1 of 4	3 2014 SOURCE CENT AM 9: 24	FEB 2 8 2014 LEGISLATIVE RESOURCE C 2014 MAR 10 AM 9:	new employees	FORM B For use by candidates and		19, 2014	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2019 死かれなり 29, 201中	UNITED STATES HOUSE OF FINANCIAL DISCLOSURE ST Period covered: January 1, 2015	UNITED FINANC Period co

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name
PAUL #
RNNS
7

Page 2 of 4

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.

Exclude: Military pay (such as National Guard of Heserve pay), lederal retirement programs, and	rement programs, and benefits	Amount	unt
Source (include date of receipt for nonoraria)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
PINDESPLINGS CHARTER SCHOOL	SALARY	\$10,140.04	46,494.48
	_		
			,

			-		R	F	J†	0	S.P.	១១ ភេទភ	≖ ±₽ 8∃∃∃∏	5	2 # 17	z z z	ר עלא	a y	3 # 2 5 5 5		\neg
	22	<u>ित्त</u>	V	4		+		<u>р</u>	σ.	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. For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	Exclude: Your personal residence, including second fromes and vacation homes (unless there was rental income during the reporting period); any deposits totaling 55,000 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	ocation in Block A.	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	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.	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.	Provide complete names of stocks and mutual funds (do not use ticker symbols).	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.	⊳	
	CAUSTRY DEFINED BENEFIT	PENSION – CAUSTOS DETINED BENEFIT	UITANINE BINANTIA IN BIT	PENSOUN-UNUALIMED PROP	SAVINUS ACCOUNT	12		Examples:		y sou hild (I option detail refer	and and and our of the control of th	ij	n ownership interest in a privately-held business not publicly traded, state the name of the busite he nature of its activities, and its geographic	Page 6	Prov	esu Poor	me w d of ble a nan \$	Asset and/or Income Source	1
	ARE SAL	38	- \ -	82	<u> </u>			-		nal critett	our lead ing the or I and awing awing thoose	Š	ershi oublic	ery,	ide t	ticke ticke	with a the isset	ä	1
	B C	2	15	ス	Ś				SP Mega Corp. Stock	or is obturn obturn fiscus	personation ation ation ation ation ation ation are reparations. The results of the rectangle of the rectang	>	의 왕 당 왕	her r	be very	e ⊓a	asse fair repo or se	ā	
תֻ	\$ 4	Z 1	1	₹`	<u> </u>		1st E	Si M	Meg	joint joint n on sion struc	hon hon hon hon hon in portion principal rate financian.		eres eded	eal p	r reti value the	nbok Imes	t helmark	ō,	밀
¥ a	ر چ ک	§	3	É			æ,	ž Ž	a ငွ	y hei the the stion is	resic nes (ng pe ersor ncial ncial etirer		tin a	ress city a	repo	o	d for et value as of ned"	ᅙ	BLOCK A
<u>d</u>	83	<u> </u>	\mathcal{R}	P L	\$		or P	Sch	Ď	spo ar le ched book	dence unite internation		ies p	S o M	each rting	tock	investinco	ğ	>
tior	左至	2	3	<u> </u>	Ž		g D	Simon & Schuster	tock	h you het.	ss the ss		and and	nelo Bate:	ans i	s an	and and me w	ē	ŀ
<u>a</u>	34	ĽŽ	Ē	-0	7		<u>ラ</u>	Ť		ursp ursp	ere in dep		iii de le	for in	(such shold	3	hich (b)	စ္တိ	
ass	[4	\	5	<u>E</u>			Υac			or d ouse uiren	ng se was osits or sa or incl	,	i the	vest	eldi	tual	\$1,0 \$1,0 any gene	줐	
ets	*	*		0			1st Bank of Paducah, KY accounts			epen (JT) nents	acone renta total vings come uding		ines: isud isud iseni	ment e.g.	⊃ 01 \$ (\$	fund	othe year.	\ D	ı
For additional assets and unearned income, use next page	⊢ `	<u> </u>		+			S	-			- U 0 0 0 1 E C								\dashv
Ĕ	 	<u> </u>		 	1	1			\vdash	None \$1 \$1,000			<u>≻</u>	*This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	If an asset was sold during the report-	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.		
ea	\times		×	×		1		2		\$1,001 – \$15,000			<u> </u>	1 E 8	Non	ase	ate nod se s		
T) e		×						Indefinite		\$15,001 - \$50,000			0	s g	e." ated) je	yall othe spec	_	
<u> </u>					×	×		ë	×	\$50,001 - \$100,000			П] use	. <u>j</u>	vas Vas	ÿy t t t t	Value of Asset	_
<u>c</u>							×			\$100,001 - \$250,000			ग	우호		<u>S</u>	m you he i	· Б	8
me,				ļ	 			_		\$250,001 - \$500,000			<u> </u>	ass dep	υ. α+ 6	ᅙ	iset fair met	¥	вгоск в
Ē	-			 	 	ļ				\$500,001 - \$1,000,000			<u> </u>	end	. ē	֓֓֓֟֝֟֝֟֝֟֝֟֝ <u>֚֚</u>	se at c	SS	σ
e Z				_	 			-	-	\$1,000,001 - \$5,000,0 \$5,000,001 - \$25,000,				a š	alue .	₹ ₹	ket use	₽.	
ext				 	†					\$25,000,001 - \$50,000				┫ 달,粪	. Sa	el e	e of luat valu		
paç										Over \$50,000,000				e e	ould	por	je jo		
je.										Spouse/DC Asset over	\$1,000,000*		Ζ	<u></u>	`	יי			
				×		1			×	NONE				<u>g</u>		fax Plan	Che retir allor dese		
*					ļ	ļ	┡		-	DIVIDENDS				during the reporting period.	lerest, and capital gains, reinvested, must be used as income. Check "I he asset generated no in	-Def	Check all colun retirement according you to investments or deferred incom	₹	
**	×	 _	×	 	\downarrow	<u> </u>	×			RENT INTEREST				- -	est rest	IRA:	inco	þe	В.
<i>c,</i>					+~	~	Ĥ	-	-	CAPITAL GAINS				<u> </u>	ene Jene	8 %		으	짇
			1			1		<u> </u>	 	EXCEPTED/BLIND TR	UST			1 8	mus e. CI		sthe	Type of Income	BLOCK C
7				 	+		┢	-	 	TAX-DEFERRED				g.		ay ch	that that se	Š	Ĭ
8								Royalties		Other Type of Income]		plans or IRAs), you may check the "Tax-Deferred" column. Dividends ,	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))	Ō	
בווסווש				<u> </u>	ļ			ties	_	(Specify: e.g., Partnership	Income or Farm Incon	ne)		_	even dis- lone"	≱ ₹	<u>중 추 등 로 약</u>		
V				<u> </u>	1		ļ		<u> </u>	None		_			s *	Ž.	For a chec		
_	<u>×</u>	<u> </u>	~	<u> </u>	<u> ×</u>		╀	<u> </u>	-	\$1 - \$200		=			ous Ous	CON	e come in a		
Ş	<u> </u>	<u> </u>	ļ	 	+	-	╀	-	×	\$201 \$1,000 \$1,001 \$2,500		<u> </u>			000	ē	sset the		
%		 		1	 	$\overline{\mathbf{x}}$	$ _{\times}$	×	4	\$2,501 – \$5,000		٧,	δ		r de Muni	ರ್			
<u> </u>		1		†			T			\$5,001 - \$15,000		≤	=		per n	Š	ggan cirk		
8STIMATED										\$15,001 \$50,000		XI IIIV IX	Current Year	1	* This column is for incomspouse or dependent child.	ź	assets for which k the "None" column by checking capital gains,		
3		ļ		ļ	ļ		Ļ	<u> </u>	-	\$50,001 - \$100,000		<u> </u>	Ύe	1	nt c	e,	e in in in		
\mathcal{B}		-	-	 	 	 	<u> </u>	<u> </u>		\$100,001 - \$1,000,00			ar	1	E	#	Ven F	Ą	٠
	-	-	1	+-	 	-	-	-	-	\$1,000,001 - \$5,000,0 Over \$5,000,000	JUU	×			. <u>o</u>	Ö	⇒ or ; oer ;	ğ	
\$		 	+	+		1	1	-	-	Spouse/DC Income ov	/er \$1,000.000*	×			This column is for income derived from assets solely held by your pouse or dependent child.	income. Check "None" if no income was earned or generated.	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	Amount of Income	BLOCK D
R			†	1	1	×	T		-	None		_		1	ed.	ne \	ate the	앜	욧
		×	×	1	×	1	Ī		-	\$1 – \$200		=			fror	was	ras box	nc T	D
1/10/14	×								×	\$201 – \$1,000		=	פ		رم ح	ea	od, bel	3	
9										\$1,001 - \$2,500		₹	Preceding Year		SSO	ТDE	rrec s, in low.	ē	
+	<u> </u>	ļ	ļ	-		 	×	×	-	\$2,501 - \$5,000		<u><</u>	e		ថ ទ	d or	St Didicin		
	<u> </u>	 	-		+		Ͱ	-	-	\$5,001 - \$15,000 \$15,001 - \$50,000		≤ <	l inc		öle	ge.	A 호텔 프		
	 	 	-	+	+	+	╀	-	+	\$50,001 - \$50,000		VH VIII	<u>₹</u>		₹	nen	글 글 글 关		
		 	 			+	٢	İ	+	\$100,001 - \$1,000,00	0	×	ar		e <u>d</u>	atec	Cap cap cap		
	1	1	1		1	1	T	\top	1	\$1,000,001 - \$5,000,0		×	1		by	Ή.	ego you		
										Over \$5,000,000		×	1		δ		ma rest		
									1	Spouse/DC Income or	er \$1,000,000*	¥			7		るよれる		

SCHEDULE III — LIABILITIES

Name PAUL HANNOST

Page 4 of

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-

				_
				JT SP,
			Example: First Bank of Wilmington, DE	Creditor
			May 1998	Date Liability Incurred mo/year
		NIA	Mortgage on 123 Main Street, Dover, DE	Type of Liability
				\$10,001— \$15,000
				\$15,001— \$50,000
				\$50,001— \$100,000 O
			×	\$100,001— \$250,000 □ \$250,001—
	 		 	\$500,000 m \$500,001—
			lacksquare	\$1,000,000 " # 9. \$1,000,001— G E
			-	\$5,000,000 H \$5,000,000 H \$25,000,000 H
				\$25,000,001 \$50,000,000
	 			Over \$50,000,000
				Spouse/DC Liability over ス \$1,000,000

SCHEDULE IV — POSITIONS

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

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

Position Name of Organization
SUMBIL POINCE MEMBER MT. BALDY SCHOOL

SCHEDULE V — AGREEMENTS

Page

잌

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.

Date	Date Parties To	Terms of Agreement
	N/N	-
:	•	

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.

Cook in the second seco	
Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
A P	