§ ⊠	Yes	pendent child	ities of a spouse or de Committee on Ethics.	income, transactions, or liabilities of a spouse or dependent child have first consulted with the Committee on Ethics.	arned" income is you have fir	r assets, "unea ver "yes" unles	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or or because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics	EXEMPTION because they
N ₀	Yes 🔲	ot be	ccepted trusts" need no nt child?	s and certain other "ex spouse, or a depender	iittee on Ethic iing you, your	by the Comm a trust benefit	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?	TRUSTS—De
ι ώ 	QUESTION)F THESE	SWER EACH OF THESE QUESTIONS	- AN	T INFOR	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSIO
	response.	each "Yes" ı	lule attached for each "Yes" response	part must be answered and the appropriate schedule	and the a	answered	Each question in this part must be	
<u>№</u>	Yes 🔲	\$5,000 from	npensation of more than \$5,000 from to prior years?	VI. Did you receive compensation of n a single source in the two prior years? If yes, complete and attach Schedule	No No	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.	III. Did you, yo able liability (me If yes, comple t
№	Yes	rangement	 V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V. 	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V.	S C	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.	II. Did you, you income of more reportable assertif yes, complete.
8 ⊠	es M	реfore 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.	IV. Did you hold any rep of filing in the current ca If yes, complete and at	8	Yes X	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.	I. Did you or yo fees) of \$200 o
				ANSWER EACH OF THESE QUESTIONS	OF THES	R EACH	In all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWE	In all sections, PRELIMIN
who files	against any individual v more than 30 days late.	against an more than (Amendment	1.11.1	Liection	ffice:	New officer or employee Employing Office	Status
ssessed	A <i>\$200 penalty</i> shall be assessed	A \$200 per	Check if	Date of MAY 6th 2014	Date of	MANA		Filer
	(Office Use Only)	ON "				,		
S3	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE OF		Daytime Telephone:	Daytime	7	ANDREW TOBIAS MCNEIL	Name:
Page 1 of TER 7	:- CEN	LEGISLATIVE 2013 DEC 2	∄ B and new employees	FORM For use by candidates a		TIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, مجاری میراندی افتریندی	UNITED S FINANCIA Period cove
	777 - " " " " " " " " " " " " " " " " "	ファフ						

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name ANDREW TOBIAS MCNEIL

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.

Source (include date of receipt for honoraria) Type			***************************************	
Salary Sear to Filing		T	Amo	unt
Salary \$6.300 Director's Fee \$400 Honorarium 0 Spouse Salary 1/3 455 GROSS SALES 1,567 1,567	Source (Include date of receipt for floridiana)	Abe	Current Year to Filing	Preceding Year
Director's Fee \$400 Honorarium 0 Spouse Salary NA SALARY 71, 455 GROSS SALES 1,567	XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Honorarium 0 Spouse Salary NA SALARY 71, 455 GROSS SALES 1,567	7	Director's Fee	\$400	\$3,200
Spouse Salary NA SALARY 71, 455 GROSS SALES 1,967		Honorarium	0	\$1,000
SALARY 71,455 GROSS SALES 1,56.7	Harris County, Texas Public Schools	Spouse Salary	NA	NA
GROSS SALES 1,567	RONNOCO COFFEE CO STLOUIS, MO	SALARY	71, 455	69,049
	MQUEIL VALLEY FARMS	GROSS SALES	1,567	2,402
		-		

SCHEDULE II — ASSETS AND "UNEARNED" INCOME **BLOCK A**

reportable asset or sources of income which generated the end of the reporting period, and (b) any other of income with a fair market value exceeding \$1,000 at Identify (a) each asset held for investment or production Asset and/or income Source

(do not use ticker symbols). Provide complete names of stocks and mutual funds more than \$200 in "unearned" income during the year.

account that exceeds the reporting thresholds. For **all IRAs** and other retirement plans (such as 401(k) plans) provide the value for each asset held in the

For rental or other real property held for investment,

that is not publicly traded, state the name of the business, the nature of its activities, and its geographic For an ownership interest in a privately-held business provide a complete address or a description, rental property," and the city and state.

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location in Block A.

ing \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income the Thrift Savings Plan. derived from, a federal retirement program, including income during the reporting period); any deposits totalhomes and vacation homes (unless there was rental Exclude: Your personal residence, including second

in the optional column on the far left. dent child (DC) or is jointly held with your spouse (JT), income source is that of your spouse (SP) or depen-If you so choose, you may indicate that an asset or

please refer to the instruction booklet For a detailed discussion of Schedule II requirements

SP,

SP Mega Corp. Stock Simon & Schuster

Indefinite

None

\$1 - \$1,000

\$1,001 - \$15,000

\$15,001 -- \$50,000

\$50,001 - \$100,000

\$100,001 - \$250,000

\$250,001 - \$500,000

Over \$50,000,000

NONE

RENT

DIVIDENDS

INTEDEST

×

\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000

\$25,000,001 - \$50,000,000

Spouse/DC Asset over \$1,000,000

DC, Examples:

Value of Asset **BLOCK B**

please specify the method used. method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of

be "None." it generated income, the value should If an asset was sold during the reportng year and is included only because

by your spouse or dependent child. This column is for assets solely held

during the reporting period.

BLOCK C

"Tax-Deferred" column. Dividends, plans or IRAs), you may check the deferred income (such as 401(k) investments or that generate taxallow you to choose specific retirement accounts that do not Check all columns that apply. For Type of Income

If the asset generated no income closed as income. Check "None" If reinvested, must be disnterest, and capital gains, even

Amount of Income BLOCK D

income. Check "None" if no income was earned or generated. and capital gains, even if reinvested, must be disclosed as income by checking the appropriate box below. Dividends, interest, check the "None" column. For all other assets, indicate the category of For assets for which you checked "Tax-Deferred" in Block C, you may

spouse or dependent child. * This column is for income derived from assets solely held by your

<u> </u>	ļ				×			INTEREST		
								CAPITAL GAINS		
						[EXCEPTED/BLIND TRUST		
	×	×	メ	~<				TAX-DEFERRED		
ZYM						Royalties		Other Type of Income	•	
100	-					8		(Specify: e.g., Partnership Income or Farm Inco	ome)	
	×	~	イ	/				None		
								\$1 – \$200	=	
								\$201 - \$1,000	#	
X							×	\$1,001 – \$2,500	₹	
					X	×		\$2,501 - \$5,000	٧	5
								\$5,001 – \$15,000	≤	77
								\$15,001 \$50,000	XI IIIV IIV	Current Year
								\$50,001 - \$100,000	≦	
								\$100,001 \$1,000,000	*	ea
								\$1,000,001 - \$5,000,000	×	-
								Over \$5,000,000	X	
								Spouse/DC Income over \$1,000,000*	¥	
	×	~	X	イ				None	-	
								\$1 – \$200	=	
							X	\$201 - \$1,000	=	פ
X								\$1,001 - \$2,500	~	ē
					×	×		\$2,501 \$5,000	/	ĕ
								\$5,001 - \$15,000	١	di i
								\$15,001 - \$50,000	≨	وا
								\$50,001 - \$100,000	III III	Preceding Yea
								\$100,001 - \$1,000,000	⋝	ar
								\$1,000,001 - \$5,000,000	×	
								Over \$5,000,000	×	
								Spouse/DC Income over \$1,000,000*	¥	

ROYCE Premier FUNDS

MCDEIL VAITEL PREEDOM, IN SHEEP

FARMS OWNER

NEUBERGER BERMAN GENESIS

AND LOCATE

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KAYGUAAAN TEED PONTOUG

LOOMIS SAYLES BOND FUND

1st Bank of Paducah, KY accounts