N _o	Yes 🔲	ependent child	ities of a spouse or dependent child Committee on Ethics.	"unearned" income, transactions, or liabiliunless you have first consulted with the C	arned" income ss you have fir	any other assets, "une not answer "yes" unle	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse 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 me
S S	Yes 🔲	ot be	cepted trusts" need nnt child?	s and certain other "ex spouse, or a depender	nittee on Ethic ting you, your	approved by the Comr s of such a trust benef	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—Detail disclosed. Have
I	QUESTION	OF THESE	SWER EACH OF THESE QUESTIONS	MATION — ANS	T INFOR	DENT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — AN	EXCLUSION
	response.	each "Yes" ı	lule attached for each "Yes" response	and the appropriate sched	and the a	nust be answered	Each question in this part must be answered	į.
š 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.	VI. Did you receive com a single source in the tw if yes, complete and at	_ □	od? 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.	II. Did you, your si able liability (more t If yes, complete a
S S	Yes	rrangement	portable agreement or arrangement ttach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V.	S S	earned" Iny period? Yes	It. 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, your sp income of more that reportable asset wo If yes, complete as
No U	Yes 📝	before the date or two years?	ortable positions on or the price tach Schedule IV.	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.	N _S	ind? Yes	 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. 	I. Did you or your s fees) of \$200 or mo If yes, complete a
				ANSWER EACH OF THESE QUESTIONS	OF THES	NSWER EACH	PRELIMINARY INFORMATION — ANSW	PRELIMINA
	more than 30 days late.	more than :				Employing Office:	employee	
assessed who files	o	A \$200 pen against any	Check if Amendment	HIOC NOW H	Date of Election:	State: 1X District:	Candidate for the House of Representatives D New officer or	Filer Status
ATIVES	U.S. HOUSE OF THE CLERK OFFICE OF THE CLERK OFFICE OF THE CLERK CLERK OFFICE OF THE CLERK	U.S. HOUSE		Daytime Telephone	Daytime		UD K. COEAT	Name: DAVID
age 1 of 49 ENTER	MAY 1.5 2014 age 1 of 2 LEGISLATIVE RESOURCE CENTER 2014 MAY 22 PM 12: 21	MA) LEGISLATI 2014 MA	Ⅰ B and new employees	FORM For use by candidates a		SENTATIVES NT 2 31, 2013	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2013 - アドウ・ストラン・ファン・ファン・ファン・ファン・ファン・ファン・ファン・ファン・ファン・ファ	UNITED STA

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name DAVID E. COZAZ

Excide: willtary pay (such as National Guard of Reserve pay), lederal retilement programs, and benefits received under the Social Security Act. Amount	ment programs, and benefits	Amount occial Sec	unt
Source (include date of receipt for honoraria)	Туре	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
SEE ATTACHMENT: SCHEDULE I/C			
		9	

SHE MIRCHITENT.		SP, Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> there was rental income during the reporting period); any deposits totaling \$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 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.	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.	Asset and/or Income Source Identity (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) provide the value for each asset held in the account that exceeds the reporting thresholds. 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.
	Indefinite X	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 - \$25,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*	≥ 00 00 00 00 00 00 00 00 00 00 00 00 00	Walue of Asset Value of Asset dicate value of asset at close of porting year. If you use a valuation ethod other than fair market value, ease specify the method used. an asset was sold during the report g year and is included only because generated income, the value should "None." This column is for assets solely held your spouse or dependent child.
	X	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income	e)	Type of 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 "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
	××	×	\$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000	Current Year	Amount of income 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. * This column is for income derived from assets solely held by your spouse or dependent child.
	××		None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000	Preceding Year	Amount of Income Amount of Income Amount of Income 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. * This column is for income derived from assets solely held by your spouse or dependent child.

SCHEDULE III — LIABILITIES

Name DAVID E. COZAY

Page 4 of 1

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 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.

			,					Amou	int of	Amount of Liability	Ity			
SP,	Creditor	Date Liability	Type of Liability	>	В	ဂ		m		េត	o <u> </u>	n –		er 🔭
Į,	Creditor	incurred mo/year	Type of Liability	\$10,001— \$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- \$25,000,000	\$25,000,00° \$50,000,000	Over \$50,000,000	Spouse/DC Liability ove \$1.000.000
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE			L	Ь.,		L	_	_	L		
	SEE ATTACHMENT:								ļ					
	SCHEMIE II)D													

SCHEDULE IV - POSITIONS

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, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

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 nature. Position Name of Organization SEE ATTROUMENT: SOMERULE TILE SOMERULE TILE	_	 			_	_
		*	3/12 singations	SEE ATTACHMENT.	Position	and positions solely of an honorary na
					Name of Organization	nature.

Filing ID #10002056



FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • B-106 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name:

David Edwin Cozad

Status:

Congressional Candidate

State/District:

TX06

FILING INFORMATION

Filing Type:

Amendment Report

Filing Year:

2013

Filing Date:

15 MAY 2014

SCHEDULE A: Assets and "Unearned" Income

COMMUNICATION CHEARNED	LICOME				
Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Jolene G. Cozad IRA	SP	\$1,001 - \$15,000	Interest	\$1 - \$200	Γ
USAA Individual Retirement Annity		\$1,001 - \$15,000	Dividends	\$1 - \$200	Γ
DESCRIPTION: IRA with USAA Life Insurance					
USAA S/D ⇒ American Superconductor Corporation (AMSC)		\$1,001 - \$15,000	Capital Gains	None	Γ
DESCRIPTION: AMSC makes high temperature super cond	lucting prod	lucts.			
USAA S/D ⇒ Cameco Corporation (CCJ)		\$1,001 - \$15,000	Capital Gains	None	r
USAA S/D ⇒ Caterpillar, Inc. (CAT)		\$15,001 - \$50,000	Capital Gains, Dividends	\$201 - \$1,000	Γ
DESCRIPTION: CAT is an international producer of constru	uction equi	pment			
USAA S/D ⇒ Deere & Company (DE)		\$1,001 - \$15,000	Capital Gains, Dividends	None	Γ
USAA S/D ⇒ First Solar, Inc. (FSLR)		\$15,001 - \$50,000	Capital Gains	\$2,501 - \$5,000	Γ-
DESCRIPTION: First Solar is a growth stock. No dividends.	,				
USAA S/D ⇒ General Electric Company (GE)		\$1,001 - \$15,000	Capital Gains, Dividends	\$201 - \$1,000	Γ
USAA S/D ⇒ Intel Corporation (INTC)		\$1,001 - \$15,000	Capital Gains, Dividends	\$201 - \$1,000	٢

DAVID E. COZAD P. 6 0F7

Asset	Owner Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
USAA S/D ⇒ Molycorp, Inc (MCP)	\$1,001 - \$ <u>15,</u> 000	Capital Gains	None	Γ
USAA S/D ⇒ Oracle Corporation (ORCL)	\$1,001 - \$15,000	Capital Gains, Dividends	\$201 - \$1,000	Г
USAA S/D ⇒ Polypore International Inc (PPO)	\$1,001 - \$15,000	Capital Gains	None	Γ
USAA S/D ⇒ Schlumberger N.V. (SLB)	\$15,001 - \$50,000	Capital Gains, Dividends	\$201 - \$1,000	Γ
USAA S/D ⇒ USAA Money Market Fund	\$1,001 - \$15,000	Dividends	\$1 - \$200	Г

DESCRIPTION: This is the money market account where cash is accumulated from sale or purchase of stocks or ETFs.

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE . EARNED INCOME

Source	Туре	Amount
LGM Management	Spouse salary	\$37,324
Social Security Administration	SSA payments	\$24,479

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Туре	Amount of Liability
	USAA Bank	2007-2012	Mastercard	\$15,001 - \$50,000
	[Private Comments: medical costs of sur	gery and rehab]		
JT	Bank of Americ≉	Prior to 2008	Visa	\$10,000 - \$15,000
	[Private Comments: Education expense f	or kids]		
JT	Citi Bank	Prior to 2008	Credit card	\$10,000 - \$15,000
	[Private Comments: Education costs for	kids]		
JT	ACS	Prior to 2008	Education loans	\$10,000 - \$15,000
JT	JPMorgan Chase Bank	Prior to 2000	Credit cards	\$10,000 - \$15,000

[Private Comments: Loans to my children which they are paying back.]

^{*} Asset class details available at the bottom of this form.