Period covered: January 1, \_ FINANCIAL DISCLOSURE STATEMENT **UNITED STATES HOUSE OF REPRESENTATIVES** Name: Status Filer MICHAEL New officer or employee Candidate for the House of Representatives K COLE State: 13
District: \_\_\_ Employing Office: Daytime Telephone Date of Election: For use by candidates and new employees FORM B Amendment Check if against any individual who files A \$200 penalty shall be assessed more than 30 days late. OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES LEGISLATIVE RESOURCE CENTER 2013 DEC 18 PM 1:49 (Office Use Only) Page 1 of 6

In all sections, please type or print clearly in blue or black ink.

-	ì	1
ž	ì	′
ļ	•	_
Ė		=
3		
Ξ	,	,
Ş		_
4	•	7
=		;
_	_	`
Ξ	2	7
Ξ	Ī	ī
C		j
=	Ī	j
Ē	Ĵ	í
Ē	i	•
4	•	í
5	_	7
2	2	
1	ı	
	ı	
1	b	,
5	2	•
ē	j	2
ì	į	į
ì		
Ī	1	
֓֞֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֡	1	)
֝֞֜֜֜֜֝֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜	֭֝֞֝֝֞֜֜֝֜֝֜֝֝֟֝֡֓֓֓֡֡֝֞֜֜֝֡֡֓֓֓֡֡֞֜֜֜֝֡֡֡֡֡֞֜֞֡֡֡֡֡֞֞֜֝	
֓֞֜֜֜֜֜֜֜֜֝֟֜֜֜֜֝֟֜֜֜֟֓֓֓֓֓֓֓֓֟֜֜֟֓֓֓֟֓֓֓֟		
֡֝֜֜֜֜֜֜֜֜֜֜֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֜֓֓֓֡֓֓֡		
	マース コン・コーコーソー	
	ショス コン・コーション・コージョン・コー	
	シュス・コー・コー・コー・コー・コー・ショー・ショー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー	
	1 T T C	
	ショス コピーコー・コーショ ここう	
	シャズ・コン・コーコーソフ・ニーフ	
	シャス コピーコー・コージョ ここうソー	
	シャス マド・コー・コーション・コーション・	
	シャス・コン・コー・コージョン・コージー・ニージー・ニージー・ニージー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー・コー	
	シース・コン・コー・コーソー・ション・フン・フン・フン	

	esponse.	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	and the	e answered	Each question in this part must b
□ S	es X	No XI. 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.	<b>₹</b>	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.
<b>₹</b>	Yes	No X	<b>№</b>	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.
<b>₹</b>	Yes	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.	<u>s</u>	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.

# EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

**EXEMPTION**—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. **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? Yes Yes

<u>ਫ਼</u> ∑

8 돈

### SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name MICHAEL ァ Cons <del>ک</del>

Page 1 of 6

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.

<b>Exclude:</b> Military pay (such as National Guard or Heserve pay), federal retirement programs, and benefits received under the Social Security Act.	ement programs, and benefits re	eceived under the Social s	Security Act.
Course (include date of receipt for honorarie)	Type	Amount	unt
Course (include base of receipt to Helioralia)	. Jhe	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Fyamoles: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
LITTLE CYPRESS MANDICEVILLE CISO	SALARY		9379.00
LAMAR STATE COLLEGE - ORDENGE	Spouse shuapy	25079.00	26781,00
•			

		-	1	1		,	_	<b>60</b>				50 m 0 0 0	OT 33505	
,				ļ		л		SP.	Exclude: Your personal residence, including second homes and vacation homes (unless 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.	location in Block A.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business the name of the activities and its neocraphic	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that excaeds the reporting thresholds.  For rental or other real property held for investment, provide a complete address or a description, e.g., "earls property" and the crity and state	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).	_
ŀ	ŀ					i	Examples:		be a seried of series and series are series and series and series and series and series and series	9 5	1 N O	ente (*)	that	BLOCK A  Asset and/or Income Source
							age T		ind ()  Oo continue of the con	·	A PE	As a rovid	a) ea of t of t eas eas n \$22 n \$22 se ti	se
								-	Vaca Strings	Block A.	blic s	oth exce	the set of the plets	<u>8</u>
					·			SP Mega Corp. Stock	tion eraps	۶,	2 ± Ξ	othe seds	asse fair report or so or so or so or so or so	₽ P
						쫎	Simon & Schuster	ĕ.	honain portain portain portain prairie fina an.  an. an. an. an. an. struit str	5	ade e	ear stalle	the mar mar ource near	<b>≥</b> ₽
						Ban	₫	ja (	mes mes mes mes mes mes mes retire re		ខ្ម	prop brep	Ket of Records	BLOCK A
						ᅉ	က္က	ğ	end in bo		ate	nent of the same o	value of inc	8 2
						Pad	Ĕ	တ္	with p okles	,	" # <del>*</del> * * * * * * * * * * * * * * * * * *	다 마음 다 아니	estr d, a com	Ĭ
	'	]	l			Ca	ĕ	홋	any ackir st he any ackir st in or any ackir st in a si tha se (t) se (t			ns (s asse asse that des	nent ceed swh	Š
						1st Bank of Paducah, KY accounts			require		# # <del> </del>	icrip	mu might of	2
						e e			vas		5 <del>5</del> 2	weg seas	\$1,0 \$1,0 genv the	ਨੂ
l						8			rent total luding set			101( e.g	tung	W
						ᇙ			. 그 구 C C C C C C C C C C C C C C C C C C	1 6	5 4 8	ਮੁਖ਼ ਫਣ	15 - 25 et al 2	
						Π			None		>	⊅ ન છે.≓્ર	<u></u>	
				-					\$1 - \$1,000		<b>D</b>	yohis ten	ethor an a	
					Ţ	Γ	₹		\$1,001 - \$15,000		ဂ	it generate be "None." *This colur by your sp	ass es	
	<b>†</b>	İ					Indefinite		\$15,001 - \$50,000		D	spoj itec	yalı pec et v	<
	<u> </u>	<u> </u>	T	1	1	<b>T</b>	nite	×	\$50,001 - \$100,000		Ш	n is	ue i ert ify	<u> </u>
	T	<u> </u>	1	<b>T</b>		×			\$100,001 - \$250,000		71	it generated income, the value should be "None."  *This column is for assets solely held by your spouse or dependent child.	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.  If an asset was sold during the reporting year and is included only because	BLOCK B Value of Asset
· · · · ·		<del> </del>	-			t	<del>                                     </del>		\$250,001 - \$500,000		G	de ne		<u>육</u>
			1	1		T			\$500,001 - \$1,000,000		I	per sse	ed ed	<b>≥</b> ⊼ B
	† — —	<u> </u>	<del>†</del>	1	†	T	-		\$1,000,001 - \$5,000,000			ts s		Se
	<b></b>					1	<u> </u>		\$5,000,001 - \$25,000,000		<u>_</u>	nt se lue	ose vall	#
<u> </u>		<b></b>	<u> </u>	<del>                                     </del>	1	┪	1		\$25,000,001 - \$50,000,000		ㅈ	Shill Sh	eca d. Walt	
_		<del> </del>	<del> </del>	+	<u> </u>	1		<u> </u>	Over \$50,000,000		<u></u>	. 호 등	por le lon	
┝	· · · · ·	<del>                                     </del>	<del> </del>	+	<del> </del>	┢	-	<del>-</del>	Spouse/DC Asset over \$1,000,000*		<b>Z</b>		oγ	
<b>—</b>	<del> </del>	<del> </del>	+			1	†	×	NONE .	7 1 12 1	·	<u> </u>	1 <u>5</u> 82590	
<u> </u>		<del> </del>	┼	+	<del> </del>	╂╌	-	-	DIVIDENDS			in refers, and capital gains, even in refers, and capital gains, even closed as income. Check "None" if the asset generated no income during the reporting period.	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "ax-Deferred" column. Dividends,	
<del>  -</del>	-	-	<del> </del>	<b></b>	<del> </del>	┢	<del> </del>	<del> </del>	RENT			inverse ass	nen yo ed	BLOCK C  Type of Income
<u> </u>		<del>                                     </del>	<del> </del>	<del></del>	<del> </del>	×	-	-	INTEREST			er g	t ac	ă <u>D</u>
⊢		<u> </u>	+	+	<del> </del>		╁	-	CAPITAL GAINS	••••		port ene	oo t	BLOCK C
-		<del> </del>	+	+	<del> </del>	1-	1	<del> </del>	EXCEPTED/BLIND TRUST			mu materiate	ints hoc hat (	
ļ	<b></b>	<del> </del>	₩-	-	ļ <u> </u>	╀	<del>}</del>	1	TAX-DEFERRED			Period State	tha tha yene	<u>8</u> °
	1	-	ļ		<del> </del>	₽	1 3	┞	Other Type of Income			8 5 X 6 5	spo spo spo spatte state spo spo spo spo spo spo spo spo spo spo	Ħ
							Royallies		(Specify: e.g., Partnership Income or Farm Income	ma)		on of a	MACHE ACT	
	ļ	₩	-		<del>                                     </del>	ļ.,	. 8	1				Φ %, Υ =	3" 0 C 7 C X X	
	<u> </u>		<del> </del>	<u> </u>	ļ	₽-	<del> </del>	<del>!</del> —	None			ş *	For a chec incor and inco	
ļ	ļ		<u> </u>	<b></b>	ļ	₽	╄	<del> </del>	\$1 - \$200	=		Oug his	og d ög g	
<u> </u>	<u> </u>			<del>                                     </del>	ļ	┺	╄	<del>                                     </del>	\$201 - \$1,000	=		9 0	ne.	
		ļ	ļ <u></u>	ļ		<b>.</b>	ļ	×	\$1,001 - \$2,500	7	ဂ	2 5	<b>ΣΕ΄ Σ΄ Θ΄</b> Ε΄ Ε΄	
	<u> </u>	ļ		<b>_</b>		×	×	<u> </u>	\$2,501 - \$5,000	<	Ę	l ge a		
<u> </u>	<u> </u>	<u> </u>	1	<u> </u>	ļ	1	1	-	\$5,001 - \$15,000	XI IIIV IIV	Current Year	* This column is for income spouse or dependent child.		
L	ļ	<u> </u>			ļ	1	1	<u> </u>	\$15,001 - \$50,000	-	₽	den for	log ich	
<u> </u>	<u> </u>		ļ	1	<b>_</b>	1	-	1	\$50,001 - \$100,000	1	🍝	<u> </u>	્ર હું <b>છ</b> ે. જે ક્રિકેટિં	
<u> </u>	<b></b>	<b></b>			<b>_</b>	1	1	-	\$100,001 - \$1,000,000		2	] <u></u>	¥en Hender	₽
<u></u>	<b>.</b>		<del> </del>		ļ	1	$\perp$	1	\$1,000,001 - \$5,000,000	X		<u> </u>	o Horring	2
<u> </u>	1	<u> </u>	ļ		<b></b>	1	1	1	Over \$5,000,000	×		Ger	ncc a≝ cke	<u> </u>
<u></u>		<u> </u>					<u> </u>	<u> </u>	Spouse/DC Income over \$1,000,000*	¥		. Ke	· mg # ai e d /	Int of In
						L			None				. w w e d	≓×
									\$1 – \$200	=		<b> </b>	as <b>s</b> ox as (-)	کر
	<u> </u>								\$201 - \$1,000	#		. >	_ n 17 M	
								×				Ø	<u>a</u> , <u>e</u> e e e	Ĕ
								×	\$1,001 \$2,500	7	rec	asse	ets, ir below <b>d, mu</b> earne	BLOCK D  Amount of Income
						  ×	×		\$1,001 - \$2,500 \$2,501 - \$5,000	₹	recet	assets	ets, indiction below. Days the must be bearned o	ome
						  ×	×		\$1,001 - \$2,500 <b>\$2,501 - \$5,000</b> \$5,001 - \$15,000	₹	recedin	assets so	sferred" in B ets, indicate below. Divit d, must be earned or g	ome
						×	×		\$1,001 - \$2,500 \$2,501 - \$5,000	₹	receding '	assets solely	iferred" in Bloc ets, indicate th below. <b>Divider</b> <b>1, must be d</b> earned or gene	ome
						×	×		\$1,001 - \$2,500 <b>\$2,501 - \$5,000</b> \$5,001 - \$15,000	₹	receding Ye	assers solely ne	iferred" in Block C ets, indicate the c below. <b>Dividends</b> <b>I, must be disc</b> earned or general	ome
						×	×		\$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000	XI IIIV IIV V	Preceding Year	assets solely neigh	iferred" in Block C, y ets, indicate the cate below. <b>Dividends, in</b> <b>1, must be disclo</b> u earned or generated	ome
						×	×		\$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	V VI VII VIII IX X	receding Year	assets solely neid by	For assets for which you checked "Tax-Deferred" in Block C. you check the "None" column. For all other assets, indicate the catego income by checking the appropriate box below. Dividends, interand capital gains, even if reinvested, must be disclosed income. Check "None" if no income was earned or generated.	ome
						×	×		\$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	XI IIIV IIV V	receding Year	This column is tor income derived from assets solely neld by your pouse or dependent child.	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.	эте

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name MICHABL & COLE OR

Page 1 of 6

Continu	Continuation Sheet (if needed)			i		
	BLOCK A	вгоск в		BLOCK C	вго	BLOCK D
	Asset and/or Income Source	Value of Asset	— Ту <sub>!</sub>	Type of Income	Amount	Amount of Income
SP.		ABCDEFGHIJ	<u> </u>		Current Year	Preceding Year
<u>-</u>			00	(Specif		
DO .		00 000 000 000,000	,000,0	come	000,000	
		\$50,000 \$50,000 \$100,00 - \$250,0 - \$500,0 - \$1,000 1 - \$5,0	01 – \$50 000,000 Asset o	GAINS D/BLINI PRED pe of Inc	2,500 5,000 15,000 \$50,000 \$100,000 -\$1,000,0	2,500 5,000 15,000 \$50,000 \$100,000
		None \$1 - \$1,00 \$1,001 - \$ \$15,001 - \$50,001 \$250,001 \$500,001 \$1,000,00 \$5,000,00	\$25,000,0 Over \$50, Spouse/DO NONE DIVIDENT	INTERES CAPITAL EXCEPTE TAX-DEF Other Ty Partnersh	\$1 - \$200 \$201 - \$1, \$1,001 - \$ \$2,501 - \$ \$5,001 - \$ \$50,001 - \$100,001 \$1,000,000 Over \$5,000 Spouse/DC In	None \$1 - \$200 \$201 - \$1 \$1,001 - \$ \$2,501 - \$ \$5,001 - \$ \$15,001 - \$50,001 -
l 						
_						

This page may be copied if more space is required.

#### SCHEDULE III — LIABILITIES

Name MYLLARGE K COLE JR

Page 5 of 6

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.

			7	17		SP, DC, JT	
			GM FINANCIAL	SCOTT BALLARD	Example:   First Bank of Wilmington, DE	Creditor	
			JUN 2013	F68 2010	May 1998	Date Liability Incurred mo/year	
			JUN 2013 NOTE ON 2013 CHECK SPARK	FEG 2010 MODICALE on 2486 ADES ORMENT	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
						\$10,001 \$15,000	
			×	×		\$15,001— \$50,000	
		1 1			L	\$50,001 \$100,000 O	
<u> </u>	_				×	\$100,001— \$250,000	
		<u> </u>			L	\$250,001 \$500,000 m	Amo
	<del> </del> -					\$500,001— \$1,000,000 71 \$1,000,001—	Int of
			-		-	\$5,000,001 — _	Amount of Liability
<b> </b>		-			-	\$25,000,000 <b>=</b>	ty
		-		-	-	\$50,000,000 TOVer	
			-		-	\$50,000,000 C Spouse/DC	
					L	Liebility over 大 \$1.000.000	

#### 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,

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 achieve the bosonic party of campaign organization);

Position	Name of Organization
201	

#### SCHEDULE V — AGREEMENTS

Page \$ of 6

Name

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