Yes No X		sactions, or liabilities of a spouse or dependent child because vith the Committee on Ethics.	" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spothey meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
Yes No X		d certain other "excepted trusts" need not be dis	e on Ethics and dependent chil	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 dependent child?
Yes No X			ublic Offering?	IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?
JESTIONS	F THESE QU	MATION — ANSWER EACH OF THESE QUESTIONS	T INFORI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
ered and the fes" response.	must be answ ed for each "Y	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	No U	V. 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 V.
Yes No X	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	No Control	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
Yes No		VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	<u>8</u>	III. 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 III.
Yes No	d receive any n the reporting	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	× _S	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
Yes No X		VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	N _S	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 Yes
		E QUESTIONS	OF THESE	PRELIMINARY INFORMATION — ANSWER EACH
A \$200 penalty shall be assessed against anyone who files more than 30 days late.	A \$200 penalty against anyone 30 days late.	e Termination Date: Termination	Officer or Employee	Status Member of the U.S. State: 77 Status House of Representatives District: 7 Report Mannual (May 15, 2013) Amendment
S. HOUSE OF REPUBLIC TO AN IN 19	U.S. HÖÜSE ÖF RETOLE (Office Use Only	Daytime Telephone:	Daytime T	TIMOTHY H. BISH
DELIVERED MC	DELI	Form A For use by Members, officers, and employees	MENT	CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT
AND Page 1 of 6			<u> </u>	

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Page 2 of 6

SCHEDULE I—EARNED INCOME

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.	its received under the Social Sec	curity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
TAGHIS SKAZETIH) 3HI	SPOUSE SALARY	\$47,000

\$500,001 - \$1,000,000	For all IRAs and other retirement plans (such as 411(x)) * This column is for assets held solely by your plans) provide the value for each asset held in the spouse or dependent child.	income, the value should be "None." * This column is for assets held solely by your spouse or dependent child.		
TILA A CREE STREE ACCOUNT -THA TRADITIONAL ACCOUNT -THA TRADITIONAL ACCOUNT -TRADITIONAL ACCOUNT -TRADITIO	» В С D E F	- X		
SP Mega Corp. Stock X X X	None \$1 - \$1,000 \$15,001 - \$250,000 \$100,001 - \$250,000 \$250,001 - \$500,000	\$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS	TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inc
Simon & Schuster Indefinite X X X X X X X X X	Mega Corp. Stock			
T.I.A.A C.R.E.F. TIAA TEADITIONAL ACCOUNT TIAA REAL ESTATE ACCOUNT X X X X X X X X X X X X X	Simon & Schuster Indefinite		+ +	Royalties
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ACLOUNT X X	-C.R.E.F.			
× × ××	Account			メ
(REF STOCK ACCOUNT)	REAL ESTATE ACCOUNT			X
	F STOCK ACCOUNT			*

SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

Name TIMOTHY H. BISHOP

Page 4 of 6

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SCHEDULE IV— TRANSACTIONS

Name TIMOTHY H. BISHOP

Page 5 of 6

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•															×	×		SALE			Type of Transaction
		7"																EXCH	ANGE		ᅙ
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														02-10-12	21-01-60	10-12-12		Bi-weekly, if applicable	Quarterly, Monthly, or	(MO/DAY/YR)	Date
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SCHEDULE V- LIABILITIES

Name TIMOTHY H. BISHOP

Page 6 of 6

residence (unless it is rented out or you are a Member); 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 sibling of you or your spouse. Report **revolving charge accounts** (i.e., credit cards) only if the balance at the 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 owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence. close of the preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child.

	57	77		SP, DC, JT
	CITIBANK MASTERCARD	WELLS FARCED	Example: First Bank of Wilmington, DE	Creditor
	ONGOING	JUNE 2005	May 1998	Date Liability Incurred Mo/Year
	ONGOING REYOLVING CHARGE ACCOUNT	JUNE 2012 SOUTHWHUTHON SOUT SHIP SHIP SHIP SHIP SHIP SHIP SHIP SHIP	Mortgage on 123 Main St., Dover, DE	Type of Liability
				\$10,001- \$15,000
	X			\$15,001- \$50,000 ©
	<u> </u>		L	\$50,001- \$100,000
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			L	\$25,000,001- \$50,000,000
	<u> </u>			Over \$50,000,000 — Spouse/DC Liability
				Over \$1,000,000*

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

Source Example: Mr. Joseph H. Smith, Anytown, Anystate	Description Silver Platter (determination on personal friendship received from Committee on Ethics)