8	Yes 🗆	ependent child	lities of a spouse or de Committee on Ethics.	"unearned" income, transactions, or liabil unless you have first consulted with the C	arned" income ss you have fire	<b>EXEMPTION</b> —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.	ed from this reportion?	<b>EXEMPTION</b> —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	<b>EXEMPTION</b> because they
8	Yes	ot be	ent child?	s and certain other "ex spouse, or a depender	nittee 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?	lified Blind Trust	tails regarding "Qual e you excluded from	TRUSTS—De disclosed. Hav
S	QUESTION	OF THESE (	SWER EACH OF THESE QUESTIONS	   AN	T INFORM	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	SE, DEPEN	N OF SPOUS	EXCLUSIO
	esponse.	each "Yes" r	dule attached for each "Yes" response	and the appropriate sched	d and the a	Each question in this part must be answered	in this part	Each question	
<sub>S</sub>	Yes 😰	\$5,000 from	mpensation of more than \$5,000 from two prior years?	VI. Did you receive com a single source in the tw if yes, complete and at	<u>8</u>	riod? Yes	ent child have any g the reporting pe e III.	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, you able liability (mo
z₀ ⊠	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 rep with an outside entity? If yes, complete and at	S S	inearned" i any ne period? Yes	ent child receive "uting period or hold of the end of the end.	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
N <sub>N</sub>	Yes 🗹	pefore the date	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	N <sub>S</sub>	alaries or eriod? Yes <b>V</b>	d" income (e.g., si in the reporting p e I.	<ol> <li>Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?</li> <li>If yes, complete and attach Schedule I.</li> </ol>	I. Did you or yo fees) of \$200 or If yes, complete
				E QUESTIONS	OF THESI	ANSWER EACH OF THESE QUESTIONS	ı	PRELIMINARY INFORMATION	PRELIMIN
						black ink	learly in blue or	In all sections, please type or print clearly in blue or black ink	in all sections
assessed who files	10	A <i>\$200 penalty</i> shall be against any individual more than 30 days late.	Check if Amendment	Nov. 6,2012	_ Date of Election:	State: TX District: 27 Employing Office:		Candidate for the House of Representatives New officer or employee	Filer Status
(	Office Use Only)	U.S. HOUSE U							
<b>6</b>	2012 OCT 18 PM 12: 48	2012 OCT		Telephone:	Daytime	Idwin	ret Ba	William Bret Baldwin	Name: 6
Page 1 of 6	윤	OCT 1 2 2012	M B s and new employees	FORIVE For use by candidates		ESENTATIVES ENT	OF REPRE	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2011 - らりである	UNITED S FINANCIA Period cove

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name William Bet Baldwin

Page 2 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.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

					Computer Command, Victoria, TX	Northwestern Motual-Texastinaniel Group or Part-time Solory	(SP) Faith United Mothadist Church Tolso, OK	OKlahoma Employment Security Commission, Takes U	Hilti, Inc. (North America), Tolsa, OK		II (Rec'd December 2)	First Bank & Trust. Houston, TX	XYZ Corporation, Houston, TX	Course (include date of receipt of Following)	Source (include date of receipt for honoraria)
		i			Consulting Fee	Part-time Solory	Sporse Salary (SP)	Unemployent Bonshits	Sc/ary	Spouse Salary	Honorarium	Director's Fee	Salary	- ype	Type
					A5,000-	A4 000-	101	-0,	-0-	NA	0	\$400	\$6,300	Current Year to Filing	Amount
					101	101	<del>\$7</del> 833	<i>\$11</i> 338	#47 379	NA	\$1.000	\$3,200	\$28,450	Preceding Year	unt

Acts-	STChase Accts-Texas	St Struct Global Consulting Vident	Voriable Annoity-Paclife	Traditional IRA-Pachite	579008 E. 7748/100/ TULEOX		Examples:	SP Mega Corp. Stock	that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.  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.	For an ownership interest in a privately-held business	account and its value at the end of the reporting period.  For rental or other real property held for investment, provide a complete address.	BLOCK A  Asset and/or Income Source  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).  For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, in the institution holding the
X	X		><	×	×.	×	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 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000		A B C D E F G H I J K L	Value of Asset  Value of Asset  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 it generated income, the value should be "None."
<b>X</b>	X	X	×	XX	×	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inc	come)		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.
	X	×	><	×	×		×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000  None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Current Year Preceding 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.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name William Dred Baldwin

Page of

8 Ę SP. Asset and/or Income Source BLOCK A None ₿ \$1 - \$1,000 <u>ი</u> \$1,001 - \$15,000 \$15,001 - \$50,000 Ō Value of Asset П \$50,001 - \$100,000 BLOCK B TI \$100,001 - \$250,000 ଦ \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ے \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 ㅈ Over \$50,000,000 NONE **DIVIDENDS** RENT Type of Income INTEREST **CAPITAL GAINS** BLOCK C **EXCEPTED/BLIND TRUST** TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None \$1 - \$200 \$201 - \$1,000 **Current Year** ₹ \$1,001 - \$2,500 \$2,501 - \$5,000 IIIV IV VI \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 Amount of Income ⋝ \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 × BLOCK D × Over \$5,000,000 None \$1 - \$200 \$201 - \$1,000 Preceding Year \$1,001 - \$2,500 X VI VIIVIIX \$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

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#### SCHEDULE III — LIABILITIES

Name William Boct BALDWIN PO

Page S of (p

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

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		Wells Forgo O.C. Viola June Line of FCraditions	ST Tulsa Federal Creditunia Tolsa Jan 2010 Mortgage on 9008 F77"	Example: First Bank of Wilmington, DE	Creditor	
,		Jungan	Ju 2010	May 1998	Date Liability Incurred mo/year	
		Line of Cradit (Business)	Northadeou no ababtron	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
	_				\$10,001— \$15,000	
					\$15,001— \$50,000	
		X	~_		\$50,001— \$100,000 <b>?</b> \$100,001— <b>_</b>	1
			<u> </u>	×	\$250,000 S	۱mour
				$\vdash$	\$500,000 \$500,001—	Amount of Liability
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					\$5,000,001— <b>±</b>	
					\$25,000,001—_ \$50,000,000	
		1			Over .	

#### 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,

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

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### SCHEDULE V — AGREEMENTS

Name William Bot Buldwin

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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	ont plan manita
				1	Parties To	on pair manianes by a former employer.
					Terms of Agreement	

# 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.

		 	_			_
	<u>.</u>			Example:		
				Doe Jon	Source (Name and Address)	
				Accounting services	Brief Description of Duties	