E. Did you hold any reportable positions during the reporting period or in the current calender year up through the date of filing? D. Did you, your spouse, or your dependent child have any reportable C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the Name: JAmes 2015 FINANCIAL DISCLOSURE STATEMENT 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 that benefits you, your spouse, or dependent child? the Committee on Ethics for further guidance IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact reporting period? PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS UNITED STATES HOUSE OF REPRESENTATIVES three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or your dependent child because they meet all IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS liability (more than \$10,000) at any point during the reporting period? exceeding \$1,000 during the reporting period? REPORT TYPE FILER STATUS end of the reporting period? or by Make more than \$200 in uncerned income from any reportable asset during the reporting period? X 2015 Annual (Due: May 16, 2016) U.S. House of Representatives Member of or Candidate for Kare FORSET deBaytime Telephone 202-225-6365 District: State ž X Yes ž X Yes Yes No 50 7 Amendment ₹ |<u>X</u> 종 퐝 Š For Use by Members, Officers, and Employees G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calender year up through the date of filing? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" Did any Individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period? H. Did you, your spouse, or your dependent child receive any source during the reporting period? Officer or Employee Employing Office: Termination Date of Termination: A \$200 penalty shall be assessed against any Individual who files more than 30 days late. TECHNOMINATING SHIPS SHIP WITH METERS IN THE SHIP IN T PAHG AUG 26 PM 12: 15 DELIVERED HAND ě Yes 줎 ¥es Yes 좒 ĕ X Page 1 of 8 종 ş 풓 중 중 Z. 중

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SP BANK OF HAMPTON ROADS ACCOUNT	SP SUNTRUST BANK ACCOUNT	VIRGINIA RETREMENT SYSTEM (INCOME REPORTED ON SCHED C)	VACANT LAND - CHESAPEAKE, VA	JT DUCK RD, DARE COUNTY, NC - LOT	REFLECTED ON SCHEDIKE C)	FROM THIS BUSINESS TREATED AS EANED INCOME AND	SP VIRGINIA CONSULTANTS LLC, CHESAPEAKE, VA (ALL INCOME	JT BB&T BANK ACCOUNT	SP BB&T BANK MONEY MARKET	SANK OF AMERICA ACCOUNT	SP BANK OF AMERICA ACCOUNT	536 JOHNSTOWN RD, CHESAPEAKE, VA - RENTAL HOME	JT 524 JOHNSTOWN RD, CHESAPEAKE VA - OFFICE BUILDING	SF, JT	BLOCK A Asset and/or income Source
	(2												None > \$1-\$1,000 W	
<u> </u>	X I I I I	×)) x	X	×			×	x I I X	x T	×	×		\$1,001-\$15,000 C \$15,001-\$80,000 C \$50,001-\$100,800 M \$100,001-\$250,000 T	BL(Tear-End V
													×	\$250,001-\$500,000 © \$500,001-\$1,000,000 ± \$1,000,001-\$5,000,000 — \$5,000,001-\$25,000,000 C	BLOCK B Year-End Value of Asset
			×	×										\$25,000,001-\$50,000,000	
l ×	×							×	×	×	×	×	×	Dividend Rent Interest Capital Gains	BLC Type o
		Retirement			ncome	Business								Other Type of Income	BLOCK C Type of income
×	×		×	×				×	×	×	×			(Specify) None \$1-\$200 == \$201-\$1,000	
												×		\$1,001-\$2,500 ~	BLOCK D Amount of Income
	 	-		-			 -	-	-				×	\$2,501-\$5,000	米 D f income
														Over \$5,000,000 ≥ SpousePDC Income over \$1,000,000 ≥	BL Train
		_								L				m <u>(v</u> , <u>v</u>	BLOCK E Transaction

SCHEDULE C - EARNED INCOME

Name: JAMES RANDY FORSES, SR Page 3 of B

INCOME LIMITS and PROHIBITED INCOME: The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	penseted at or above the "senior staff" raisers totally prohibited.	e was \$27,225. In addition, certain
Source (include date of receipt for honoraria)	Туре	Amount
Keene State State of Many	Approved Teaching Fee	\$6,000 \$18,000
Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1.000 N/A
VIRGINIA CONSULTANTS LIK CHESAPEAKE VA	Spowe socoa,	NIA
VIRGINIA RETIREMENT SYSTEM	ACISHAN SAT	\$ 9 m
CHESADEBKE VA REGROVAL NEOVAL CENTER	spowe towns	NA

Name: Jannes Francy Forget In Page <u>ٔ</u> OO

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. 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 (unless you rent if out or 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 liabile); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.

*Column K is for liabilities held solely by your spouse or dependent child

						>	Amount of Liability	of Liab	#
					.	0		T	T
8, J	Creditor	Date Liability Incurred	Type of Liability	Petro		, , , , , , , , , , , , , , , , , , , ,			
		MOYR		10.001- 16.000 15,001-	50,000 50,001 106,000	100,001- 250,000	Here and the second	500,001- 1,000,000 1,000,001	1,000,001 5,000,000 5,000,001 25,000,000
Exa	Exemple First Bank of Würnington, DE	5/888	Mortgage on Rental Property, Dover, DE			×			
(Sp	BANK OF AMERICA	11-09	MORTEASE-SZY JOHN						
	(24/1 CHAD)		TOWN RD CHETABERY						
			VA- OFFICE BULLAYNE					イ	
بلير	WELL FARGO	207	7			2 644			
			JOHNSTOWN RD-						

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, pertner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions

Position	Position Pointed States Services painted and company organization Name of Organization
AIN	

Name: TRME
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PARSET
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Page 1 o
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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or 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 fable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.

*Column K is for liabilities held solely by your spouse or dependent child.

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-	Carles		CONG.		Example	
	CONGRESSIONER FRU		WIERESTON BY FCU		First Bank of Willmington, DE	Creditor
-	1-14		9-12		6/98	Date Liability Incurred MO/YR
PERSONSE RESIDENCE	COURT LINE OF CREDI	PERSONAL REIDENCE		CHECKHERME VA - RENTHS	Mortgage on Rental Property, Dover, DE	Type of Liability
	7				40 de	1510 do 1 515000
X	Markel V.					\$15,001- \$50,000
						\$80.001 \$100.000
		X		×	×	\$100,001- \$250,000
		manner dobretin days				\$250,00% 16 16 16 16 16 16 16 1
Zgy ();	e e					\$1,000,000
						\$5,000,001-
						\$25,000,000 \$25,000,001 \$50,000,650
5 (S)			####			Over \$50,000,000
3	100		ក្នុំក្នុងប្រ			Ground Coughing

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions

held in any religious, social, fratemal, or political entitles (suc	held in any religious, social, fratemal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.
Position	Name of Organization
NIA	

SCHEDULE D - LIABILITIES

Name: FAMET RANDY FORGET SR Page 6 of 8

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real properly including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans ascured by eutomobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liabile); and liabilities oved to you by a spouse or the child, parent, or sibiling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held salely by your spouse or dependent child.

						SP, OC. JF	
	CON	 -		ANN	Example		
•	CONGRESSIONAL FOU			ANNE A COUNCIL	First Bearly of Wilmington, DE	Creditor	
	1-15			51.4	5/98	Date Liability Incurred MO/YR	
	CREDIT CABO	VA AFFICE BUILDING	JOHNSTOWN PO, WE	AET-LIMEL TO GASO 51-4	Mortgage on Reinfal Property, Dover, DE	Type of Liability	
at e						Signer	
	X		をえ			\$15,001- \$50,000	
						SSLOCE Sago poor	
	Page 25/58	ALANGE E	. 41 PROSECT		×	\$100,001- \$250,000	
		X		7		8250 0.00 \$600 0.000	Amount of Liability
18 (2) 144	2000		**************************************	3 (54)(20)	7,7	\$600,001- \$1,000,000	nt of L
						\$ tota mps \$ tota mps	jabili
1.4	2					\$6,000,001- \$25,000,000	₹
						##8 SORTOF \$50 dec. pou	
<u> </u>			1000	35.00	المعادرة	Over \$50,000,000	
100	1	120		1.6	C. King S.	OverStrong 0000* (Special/DC catalog	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employes, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other histitution other than the United States. Exclude: Positions

neo in any religious, social, transmat, or polytical entities (suc	nero in any religious, social, transmer, or polytical entities (such as political parties and campaign organizations); and position
MA	

SCHEDULE F - AGREEMENTS

Name: JAMES RAND FARBET IR Page 7 of B

		6-1 VIRGINIA RETIREMENT SUSTEM RETREMENT PLAN	Date Parties to Agreement Terms of Agreement	Identify the date, parties to, and general terms of any agreement or arrangement that you have 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 or	
•			rms of Agreement	ave of absence during the period of government service; mployee welfare or benefit plan maintained by a former employer.	

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from 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 \$150 or less need not be added towards the \$375 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

	Source	Description	Value
Example:	Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
	NIA		
	ι		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: JAMES
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Identify the sounce and list travel litheraty, dates, and nature of expenses provided for travel-related expenses totaling more than \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUBE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Giffs and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

170 1801					
Source	Date(w)	City of Departure Destination City of Return	Lodging? (YîN)	Food? (YIN)	Family Member Included? (YN)
Government of China (MECEA)	Aug. 8-11	Dc-Belling, China - DC	. 4	Υ	Z
Emerglist: Habited for Flumently (chartly fundation)	Mar. 3-4	0C-Boxh⊪0C	٧	Α	٧
confession pages	MAR 6-8	CHESAPEAKE, VA-			
Asmas Fourpasted use		CHARLOTTE NE-MESTRA	×	×	×
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