× ×	Yes	pendent child	"unearned" income, transactions, or liabilities of a spouse or dependent child unless you have first consulted with the Committee on Ethics.	EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabili because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the C	arned" income ss you have fir	other assets, "une t answer "yes" unle	n this report any emption? Do no	EXEMPTION — Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	EXEMPTION—Have ecause they meet	
No No	Yes 🔲	of be	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?	s and certain other "ex spouse, or a depender	nittee on Ethics ting you, your	proved by the Comr	Blind Trusts" apprepart details of	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a	RUSTS—Details risclosed. Have you	
S	QUESTION	F THESE (SWER EACH OF THESE QUESTIONS	- AN	TINFORM	NT, OR TRUS	DEPENDE	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	CLUSION C	Ш
	esponse.	each "Yes" r	dule attached for each "Yes" response	sche	and the appropriate	st be answered	his part mu	Each question in this part must be answered	Ea	
N _O	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 two If yes, complete and at	N _O	‱ ∑	ild have any repor reporting period?	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.	. Did you, your spou ble liability (more than yes, complete and	= m =
₹	Yes	angement	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	8	od? Yes	ld receive "unearn eriod or hold any the end of the peri	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.	Did you, your spour come of more than \$ portable asset worth yes, complete and	
No No	Yes 🔲	efore the date r two years?	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 report of filing in the current call figes, complete and at	S _o	or Yes	ome (e.g., salaries reporting period?	 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. 	Did you or your spo es) of \$200 or more yes, complete and	
				ANSWER EACH OF THESE QUESTIONS	OF THES	WER EACH	1	PRELIMINARY INFORMATION	RELIMINAR	. ס
						ink.	in blue or black	In all sections, please type or print clearly in blue or black ink	all sections, please	_ 1
assessed who files	A <i>\$200 penalty</i> shall be assessed against any individual who files more than 30 days late.	A \$200 pen against any more than 3	Check if Amendment	2014	Date of Election:	State: Cary and was District: 44 9		Candidate for the House of Representatives New officer or employee	Filer Status	
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2 0 2013 11124 PH 12: 48	2013 ULL 24 PH	F2 : 2	M B and new employees	FORN For use by candidates :	7	NTATIVES	REPRESENT TATEMENT フー ブルル	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 20/2 - プレル 20/3	JNITED STAT	
		•								

Amount of Income BLOCK D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME 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. Asset and/or Income Source **BLOCK A** method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of Value of Asset BLOCK B BLOCK C

please specify the method used.

ing year and is included only because it generated income, the value should be "None." If an asset was sold during the report-

For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the

(do not use ticker symbols).

Provide complete names of stocks and mutual funds

account that exceeds the reporting thresholds.

*This column is for assets solely held

during the reporting period. if the asset generated no income closed as income. Check "None" if reinvested, must be dis-"Tax-Deferred" column. Dividends, deferred income (such as 401(k) plans or IRAs), you may check the Check all columns that apply. For retirement accounts that do not interest, and capital gains, even investments or that generate taxallow you to choose specific

Type of Income

income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as check the "None" column. For all other assets, indicate the category of For assets for which you checked "Tax-Deferred" in Block C, you may

* This column is for income derived from assets solely held by your income. Check "None" if no income was earned or generated. and capital gains, even if reinvested, must be disclosed

spouse or dependent child.

				Miss lower Of 9/75	+ 11601 ROUNTER	JT 1st Bank of Paducah, KY accounts	DC, Examples: Simon & Schuster	SP, Mega Corp. Stock	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 that is not publicly traded, state the name of the business	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.
				,		Ė			None	>	
									\$1 \$1,000	ᅲ	by your spouse or dependent child.
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							Royalties		Other Type of Income		
		<u> </u>				L	ties		(Specify: e.g., Partnership Income or Farm Income)		
				ļ	<u> </u>	L			None –		
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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name OTENEN Apans

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 Beserve pay), federal retirement programs, and benefits received under the Social Security Act 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

						PA WITTE (MARYAUN) AGAMES)	RENTIAL PROPERTY MIRA LADYA, CA 91752	RIVERSIDE COUNTY RANSPORTATION COALTON	CITY OF BINGESIDE, LA - COUNCILMAN	Harris County, Texas Public Schools	Examples: XYZ Trade Association, Chicago, IL (Rec'd December 2)	Ţ	XYZ Corporation, Houston, TX	Course (include date of receipt for notionalia)	Source (include date of receipt for honoraria)	Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.
						15A (1010F)	RENT (WIFE)	Sacary	Sayary	Spouse Salary	Honorarium	Director's Fee	Salary	lype	Type	ement programs, and benefits re
					,	1305 00	9,600 92	2000 0	39, 408 00	NA	0	\$400	\$6,300	Current Year to Filing	Amount	eceived under the Social
						32,841	7,2000	2,000 00	39,408 00	NA	\$1,000	\$3,200	\$28,450	Preceding Year	unt	Security Act.

SCHEDULE III — LIABILITIES

Name Stever Kyle Loves Page

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniling 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. 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 ture, 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-

l		•	Frank		SP, DC, JT
			CHASE BANK	Example: First Bank of Wilmington, DE	Creditor
			Ocr. 1984	May 1998	Date Liability Incurred mo/year
			OCT. 1984 11401 ROW-DOTZEE, MIGALINA, A	Mortgage on 123 Main Street, Dover, DE	Type of Liability
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					\$15,001— \$50,000
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ŀ					Over \$50,000,000
					Spouse/DC Liability over ス \$1,000,000

SCHEDULE IV — POSITIONS

cer, 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. 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 offi-

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);

are positions solory of an inchercing flatters.	AND THE PROPERTY OF THE PROPER
Position	Name of Organization

SCHEDULE V — AGREEMENTS

Neme Page of _

Date manu	Date Parties To	Terms of Agreement

EXAMBULE 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, partinership, 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